

U.S. EPA
77 W. Jackson Blvd
Chicago, Illinois 60604
ATTN: Bryan Gangwisch

LR-PJ

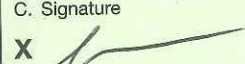
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Sent To: MR. Stephen C. Lonnenman
Street, Apt. No.; or PO Box No. 3956 State Route 412
City, State, ZIP+4 VICKERY, OH 43464

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
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<p>1. Article Addressed to:</p> <p>MR. Stephen C. Lonnenman Senior District Manager Vickery Environmental, Inc. 3956 State Route 412 Vickery, OH 43464</p>		<p>C. Signature <u>X</u> </p> <p><input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7001 0320 0006 1448 5483</p>		<p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

OCT 30 2007

REPLY TO THE ATTENTION OF:

LR-8J

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Stephen C. Lonneman
Senior District Manager
Vickery Environmental, Inc.
3956 State Route 412
Vickery, OH 43464

Re: Compliance Evaluation Inspection
EPA I.D. No.: OHD020273819

Dear Mr. Lonneman:

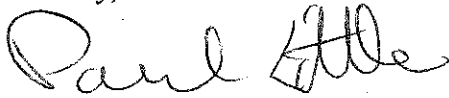
On September 26, 2007, a representative of the United States Environmental Protection Agency (U.S. EPA) and representatives of the Ohio Environmental Protection Agency (OEPA) inspected Vickery Environmental, Inc. (Vickery), located in Vickery, Ohio. The purpose of the inspection was to evaluate Vickery's compliance with certain requirements of the Resource Conservation and Recovery Act (RCRA).

As of this writing, our review of the inspection has not resulted in any violations. Please find enclosed a copy of the U.S. EPA inspection report and checklists for your files.

This determination does not limit the applicability of the requirements evaluated, other RCRA regulations, or regulations under other environmental statutes. The U.S. EPA and the OEPA will continue to evaluate your facility in the future.

If you have any questions or concerns regarding this matter, please contact Bryan Gangwisch of my staff at 312-886-0989.

Sincerely,

A handwritten signature in cursive script, appearing to read "Paul Little".

Paul Little, Chief
Compliance Section 2
RCRA Branch
Land and Chemicals Division

Enclosure

cc: Gary Deutschman, OEPA, NWDO

MaryAnn Miller, OEPA
3956 State Route 412
Vickery, OH 43464

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5, LCD, RCRA BRANCH, LR-8J
77 WEST JACKSON BOULEVARD
CHICAGO, ILLINOIS 60604

RCRA COMPLIANCE EVALUATION INSPECTION REPORT

SITE NAME: Vickery Environmental, Inc.


EPA ID No.: OHD020273819

ADDRESS: 3956 State Route 412
Vickery, OH 43464

DATE OF INSPECTION: September 26, 2007


EPA INSPECTOR: Bryan Gangwisch

PREPARED BY:


Bryan Gangwisch
Environmental Scientist
Compliance Section #2

10/19/07
Date Completed

ACCEPTED BY:


Paul Little, Chief
Compliance Section #2

10-29-07
Date

Purpose of Inspection

This inspection was an evaluation of Vickery Environmental, Inc. (Vickery), and its compliance with hazardous waste regulations found at Ohio Administrative Code (OAC), requirements in both the August 17, 2001, Ohio Environmental Protection Agency (OEPA) authorized RCRA permit and the U.S. EPA authorized RCRA permit, and the Code of Federal Regulations (CFR). I performed the inspection with Gary Deutschman and MaryAnn Miller (full-time on-site inspector) of the OEPA. The inspection was a U.S. EPA lead RCRA Compliance Evaluation Inspection (CEI).

Participants

Stephen C. Lonneman, Senior District Manager	Vickery
Brett A. Miller, Environmental, Health & Safety Manager	Vickery
Gary Deutschman, Environmental Specialist	OEPA
MaryAnn Miller, Environmental Specialist	OEPA
Bryan Gangwisch, Environmental Scientist	U.S. EPA

Introduction

The inspectors arrived at the site on September 26, 2007, at approximately 9:25 a.m. The weather consisted of cloudy conditions with a light wind, and an ambient air temperature of approximately 70 degrees Fahrenheit. We introduced ourselves, presented our inspector credentials and identification, and described the purpose of the inspection and the process by which we intended to conduct the inspection. Mr. Lonneman provided us with a verbal description of the site, led the tour throughout the facility, and then provided us with most of the records we requested for review.

Site Description

Vickery was operating as a permitted treatment, storage and disposal facility (TSDF) and a large quantity generator at the time of the inspection according to Mr. Lonneman, an OEPA annual hazardous waste report, and a U.S. EPA database. The Vickery Ohio Hazardous Waste Facility Installation and Operation Permit No. is 03-72-0191 and was issued and became effective on August 17, 2001. The current Class 3 permit allows the facility to store hazardous waste in tanks, to treat waste in tanks and a filter press, and to conduct closure/post closure and corrective action activities. Also, the U.S. EPA joint portion of the permit was issued on April 4, 2005, and became effective on April 14, 2005.

The principle features of the existing facility are as follows: Truck Unloading Facility which receives all aqueous wastes accepted by the facility (including internal truck wash); waste treatment/storage tanks which are used to store and treat all wastes received by the facility;

filtration systems used to separate solids from the treated wastestream prior to deepwell injection; four injection wells (deepwells) and associated support facilities through which all aqueous wastes are disposed; Closure Cell which is subject only to post-closure care; and various support units including the truck sampling station, truck scales, laboratory, maintenance and equipment storage building, and office and administration building.

Wastes that are designated as one of the following types and delivered to the treatment tanks appropriate for that waste type as determined by the Waste Analysis Plan (WAP): Regular wastes (hydrochloric, sulfuric, other dilute acids, brines, leachates, site generated, and other aqueous wastes); High millivolt wastes (nitric, chromic and other acids and wastes that have a high millivolt potential); and strong alkaline wastes (sodium hydroxide, ammonium hydroxide and other wastes with high pH).

Accepted wastes are pumped to storage tanks for treatment. After waste treatment/blending is completed, the contents of the tank may be pumped through a primary filter to remove any solids and/or treatment residues or may flow directly to a surge tank. The primary filter effluent then may flow to a post-filtration holding tank, to a surge tank and through a guard filter or directly to a guard filter where a surge tank is not available for injection by the deepwells.

The facility's Integrated Aqueous Waste Treatment System (IAWTS) consists of the following units: (1) the Truck Unloading Facility which includes ancillary, basket strainers and pumps, waste receiving tanks (V-Tanks), waste head-gas caustic scrubber and solids handling unit; (2) Waste Storage, and Treatment Tank System (T-Tanks); (3) the filters and filter buildings; (4) the pumps and pump houses; and (5) the yard piping.

Potentially contaminated stormwater collected from tank containment systems and facility generated wastewaters are transferred to the IAWTS for treatment and deepwell disposal. Uncontaminated surface runoff from other parts of the facility is directed off-site to Meyers Ditch or the Ohio Turnpike Ditch, in accordance with the Surface Water Management Plan.

Solids removed from the treated wastes by the strainers, bag filters, grit filters, primary and guard filters are collected and shipped to off-site disposal.

There are four separately permitted underground injection deep wells for hazardous waste disposal at the facility. Each well was issued a Class 1 hazardous Underground Injection Control (UIC) permit to operate. The permit numbers for these wells are UIC 03-72-009-PTO-1, UIC 03-72-011-PTO-1, UIC 03-72-012-PTO-1, and UIC 03-72-013-PTO-1. These permits allow Vickery to use its injection wells for the injection of treated aqueous wastes wastewater generated from plant processes underground into an injection interval consisting of the Mt. Simon Sandstone and portions of adjoining formations.

Vickery has also received approval of its petition for exemption from the land disposal restrictions of the 1974 HSWA amendments which allow Vickery to dispose of an approved list

of restricted wastes into the four underground injection wells. This approval indicates that Vickery submitted sufficient information, based on computer modeling and analytical calculations, to demonstrate to a reasonable degree of certainty that restricted wastes will not migrate from the injection zone within a 10,000 year period at concentrations which exceed health-based limits. The approval is currently in effect.

Collectively the four injection wells dispose an average monthly volume of 3-4 million gallons of treated aqueous waste at a rate of 60-70 gallons per minute (gpm) of injection as stated by Mr. Lonneman. Most of the time there is 1-2 wells running. The authorized calendar year limitation for incoming waste volume acceptance is 126 million gallons, but not to exceed 650,500 gallons per day (gpd).

Vickery obtains its process waters from two on-site groundwater wells. There are three private water supply wells located within 1,000 feet of the site. Monitoring wells have been sampled and monitored since 1981.

Wastes that are not currently accepted by the Vickery facility are as follows: Radioactive Wastes (as regulated by the NRC); Infectious Wastes; Explosive and Shock-Sensitive Reactive Wastes; Air-reactive Wastes; Water-reactive Wastes; Compressed Gases; Reactive wastes that generate dangerous quantities of toxic or explosive gases when acidified at this facility; Wastes with a flash point less than 140 degrees Fahrenheit; and Wastes with greater than 5% volatile organic compounds.

There are approximately 28 employees that work three shifts. The facility operates its deepwells on a twenty-four hours/seven days per week schedule. However, the truck unloading (approximately 25 trucks per day) process operates Monday through Friday 7:00 a.m. to 5:00 p.m. and 7-3 on Saturday. No unloading occurs on Sunday as stated by Mr. Lonneman.

There were three hazardous waste storage roll-off boxes located in the area between the V-Tanks and the T-Tanks and near Filter Building No. 2. There also was multiple hazardous waste accumulation containers located throughout the facility. The containers that are used to manage hazardous waste at Vickery consist of 20-gallon and 35-gallon containers, twelve (12) hazardous waste storage and treatment tanks, one laboratory tank, one admix tank, one pre-coat tank, one miscellaneous unit (filter press is also considered one of the treatment tanks) and roll-off boxes.

The main waste streams generated at Vickery consist of: waste filter cake (six roll-offs shipped approximately per month); spent primary and secondary cartridge, bag and guard filters (same roll-off used for filter cake); T-Tank clean-out residue (approximately once per year); miscellaneous debris (same roll-off used for filter cake); laboratory waste; gloves and personal protective equipment (same roll-off used for filter cake). There are multiple hazardous waste codes associated with the main waste types that Vickery accepts for treatment/storage and disposal, per their WAP. Spent fluorescent light bulbs were being managed as hazardous waste as stated by Mr. Lonneman. Used hydraulic oil is generated from Maintenance Shop use as

stated by Mr. Lonneman. The used oil is stored in 55-gallon drums and gets picked up for recycling. Used vehicle batteries are generated and are swapped-out with Crown Batteries in Fremont, Ohio, for recycling. Also, spent computer parts were being managed for recycling but were generated very infrequently as stated by Mr. Lonneman.

The Vickery facility also had a NPDES stormwater permit to discharge and air permits-to-install for dust control and the scrubber system.

An opening conference began at approximately 9:38 a.m. Mr. Lonneman stated that there were no active surface impoundments at the facility and that Vickery was in its fifteenth year of post-closure on the Closure Cell. Vickery's hazardous waste generation was about 99% comprised of filter press cake, gloves and personal protective equipment (PPE) as stated by Mr. Lonneman. Vickery's generated solid hazardous waste is shipped to the Province of Quebec in Canada. The filter press that was located in Filter Building No. 2 was designated per the permit as a miscellaneous unit as stated by Mr. Lonneman. Mr. Lonneman stated that Subparts AA and BB were not applicable to Vickery, but Subpart CC was applicable.

Mr. Lonneman stated that the scrubber system received working pressures from the V-Tanks and T-Tanks. T-Tanks had a conservation control device and any overpressure would re-route to the scrubber as stated by Mr. Lonneman. Mr. Lonneman also stated that the V-Tanks operated under negative pressure and the T-Tanks operated under positive pressure.

Site Tour

The physical walkthrough of the site began at approximately 10:35 a.m. We started at the Lab where every incoming truck and tote load is sampled and one out of every ten incoming loads is tested for PCBs. There were three 20-gallon containers that were accumulating hazardous waste filter paper and gloves. All three containers were labeled as "Hazardous Waste" and "Hazardous Waste Solids", dated 9/11/07, and all were closed at this time. There was a fire extinguisher, first aid and spill kit, and an eye wash in the vicinity. All of the waste profiles for the incoming loads were located in this area.

Mr. Lonneman stated that all of the site wastewater including truck wash, leachate, sanitary, stormwater and containment combined produce approximately 1 million gallons per month that are deepwelled.

We next inspected the Receipt Control Office. There we met Teresa Roth who was employed as the Receipt Control Clerk. Mr. Lonneman stated Ms. Roth monitors the scaling in and out of truck loads and ticket production for site processing. Also, Mr. Lonneman stated that the Vickery facility utilized Vickery Transportation, Inc. (VTI), to transport waste to the facility. There was a 72-hour maximum rule for all trucks to be unloaded as stated by Mr. Lonneman.

Next, we went outside to inspect the Lab Tank that was situated in a vault which had a plastic liner.

At Deepwell No. 4, which was located inside of Pump House No. 2, there was a 35-gallon container that typically is utilized to accumulate gloves, PPE and cartridge filters as stated by Mr. Lonneman. This container was empty at this time. There was an eye wash and fire extinguisher in this pump house. The aboveground piping run that lead to Deepwell No. 4 was double-walled. This deepwell was operating at 40-50 gpm as stated by Mr. Lonneman. The annulus pot that utilized diesel pressure as a leak detection indicator for the deepwells was described to us by Mr. Lonneman. Two pictures were taken at this time, one of the No. 4 well head and one of the aboveground piping run and leak detection sensor in the piping run. Pump House No. 2 and Deepwell No. 4 were inspected as a representative well/pump house set up.

Next, we inspected the Sewage Tank along with surface water management gate A-7.

At the Unloading Building, where paperwork is generated and handed to personnel that take the samples of the truck and tote loads to the Lab. Once the sample is verified, personnel in the Lab fax the same paperwork back to the Unloading Building to determine what process path the sampled waste stream will be sent to.

Next, we inspected the Office Control of the IAWTS. We met Vinny Sidoti who was one of nine employees who take part in conducting daily inspections of the single-walled aboveground piping run at the facility. Mr. Lonneman stated that the deepwells at the Vickery facility started in 1978. Also, the wells are electronically inspected every hour and the tanks are inspected every two hours. All of the daily inspections, required by the permit, that take place in the field are all kept in the Office Control Room. Those inspections include tanks, lines, pumps, high-level alarms, filter press and sumps, admix and pre-coat tanks and the bag filter system.

Next, we inspected the V-Tank Building. There were four double-walled 6,000-gallon V-Tanks situated in a vault.

At the Scrubber System, there were no visual emissions. A picture was taken at this time. Also, there were some empty roll-off boxes in this vicinity.

Next, we inspected the Maintenance Shop. There was one 35-gallon container that was accumulating hazardous waste gloves and rags. The container was labeled as "Hazardous Waste", dated 9/11/07, and was closed at this time. There was a fire extinguisher, first aid and spill kit, and an eye wash in the vicinity.

At the Oil Storage Room, there were four 55-gallon drums that contained used oil. All four of the drums were labeled as "Used Oil" and were closed at this time.

Next, we inspected the T-Tanks. There were two roll-off boxes in the area between the V-Tanks and the T-Tanks. One of the roll-off boxes contained demolished piping. The roll-off box was labeled as "Hazardous Waste", dated 9/24/07, and was covered at this time. The other roll-off box contained non-hazardous waste.

Next, we inspected Filter Building No. 1. There was one 35-gallon container that was accumulating hazardous waste gloves and rags. The container was labeled as "Hazardous Waste", dated 9/11/07, and was closed at this time. There was a fire extinguisher, first aid and spill kit, and an eye wash in the vicinity.

Next, we inspected Filter Building No. 2. There was one roll-off box situated in the building that contained waste filter cake. The roll-off box was labeled as "Hazardous Waste", dated 9/15/07, and was covered at this time. Also, there was one 35-gallon container that was accumulating hazardous waste gloves and rags. The container was labeled as "Hazardous Waste", dated 9/11/07, and was closed at this time. There was a fire extinguisher, spill kit, and an eye wash in the vicinity.

Outside of Filter Building No. 2, there were seven empty roll-off boxes situated for future use. Also, there was one roll-off box that contained waste filter cake. The roll-off box was labeled as "Hazardous Waste", dated 8/5/07, and was covered at this time.

Next, we inspected the T-Tank Pump House. There was one 35-gallon container that was accumulating hazardous waste rags and PPE. The container was labeled as "Hazardous Waste", dated 9/11/07, and was closed at this time. There was a fire extinguisher, spill kit, and an eye wash in the vicinity.

The inspectors broke for lunch at approximately 12:40 p.m.

The inspectors arrived back at the facility at approximately 2:15 p.m.

Record Review

Most of the design and installation certifications for the hazardous waste storage and treatment tanks were previously inspected for compliance as required by the permit. However, the more recently installed filtered acid tanks (FAT-5 and FAT-3) certifications were completed on 7/22/98 and 10/25/04, respectively, by Bowser-Morner Associates, Inc (Bowser-Morner). Those certifications were sufficient. Also, the tank certifications for the more recently installed V-Tanks were completed on 8/19/98 (tanks 6 & 7) and 9/14/98 (tanks 4 & 5), respectively, by Bowser-Morner. Those certifications were also sufficient.

The daily documented inspections of the hazardous waste storage and treatment tank systems were reviewed. All of the days were documented and were kept on file for at least the last three years. The hazardous waste storage and treatment tank inspections followed the inspection schedule as required by the permit. Also, other daily inspections that were occurring at Vickery either as required by the permit or by management practice included: truck scale; hazardous waste roll-off boxes; IAWTS; deepwells; Truck Unloading/Sampling Station; Gas Scrubber; Lab; Closure Cell; KK-groundwater monitoring well; supplied air equipment; and road dust. Any one of nine different employees typically conducts the inspections.

The weekly documented inspections of hazardous waste storage containers from the multiple locations throughout the facility were reviewed by the inspectors. All of the weeks were documented and were kept on file for at least the last three years. The hazardous waste storage container inspections followed the inspection schedule as required by the permit. Also, other weekly inspections that were occurring at Vickery either as required by the permit or by management practice included: emergency communications; injection lines; safety inventory; and leachate. Any one of nine different employees typically conducts the inspections.

Monthly inspections that were occurring at Vickery either as required by the permit or by management practice included: security; surface water; and capillary drain. Any one of nine different employees typically conducts the inspections.

Quarterly inspections that were occurring at Vickery either as required by the permit or by management practice included: groundwater monitoring wells. Any one of nine different employees typically conducts the inspections.

Semi-annual inspections that were occurring at Vickery either as required by the permit or by management practice included: tank air emissions; Closure Cell; and depth of leachate. Any one of nine different employees typically conducts the inspections.

The closure and post-closure cost estimates and insurance liability coverages were inspected. The most recent total closure cost estimate was \$3,249,665 and the total post-closure cost estimate was \$3,356,042. These estimates were updated as of 1/26/07.

The Certificate of Insurance and Liability for closure and post-closure was inspected. The most recent certificate, dated 2/2/07, indicated that Vickery had sufficient liability coverage as required by the permit, for occurrences that could arise at the facility.

Initial hazardous waste training at Vickery is provided to all employees and contractors involved in the production/hazardous waste management process as stated by Mr. Lonneman. The RCRA training and annual refreshers are administered and documented. The content of the hazardous waste training program included contingency plan implementation; procedures for replacing emergency equipment; communications and alarm systems; response to fires or explosions; response to groundwater contamination incidents; and shutdown of operations and all other areas as required by the permit. The documentation of training record requirements were available and included the following: job descriptions for each job title related to hazardous waste management, including requisite skill, education, or other qualifications, and duties of facility personnel assigned to each position; the type and amount of both introductory and continuing training to be given to each employee filling a position; and documented annual hazardous waste management training. The inspectors observed Mr. Lonneman's training records and annual RCRA refreshers. Annual RCRA training records were also observed for other employees and annual (described in the permit as the calendar year) training was being performed in accordance with Vickery's permit language.

There was a contingency plan in place for the facility. The most recently updated (7/13/06) plan included the following: actions to be taken in response to fires or explosions; procedures for emergency shutdown; description of the site layout including all hazardous waste storage locations; emergency equipment capabilities and locations for fire extinguishers, pull-alarm locations, and eyewash locations and all other areas as required by the permit. Copies of the contingency documents have been sent to all local emergency authorities as stated by the plan in the past. The OEPA permit required Vickery to review the facility contingency plan at least annually. However, it was noted during the inspection, that employee training records indicated that the contingency plan was reviewed in 2007 as part of the employee training schedule. In addition, Mr. Miller stated that he reviewed the contingency plan as part of his new duties required by his position.

The WAP was previously inspected and the most recent requested revision that included an update of sampling methods was completed on 8/16/05, and correspondence dated 12/16/05, indicated that OEPA approved of the modification.

The most recent manifests show that all hazardous waste is sent to the following TSDF: Stablex (NYD980756415) in Blainville, Province of Quebec, Canada. The following transporter was also used: Rollex LTEE (NYF006000063). All export notices and certificates were available for review on each manifest for each waste stream. A couple of incoming truck loads come from Canada per day as stated by Mr. Lonneman. The manifests were retained on file for at least the last three years. Mr. Lonneman stated that Ms. Roth typically signs the manifests.

Waste determinations were documented for all hazardous and non-hazardous waste streams and were documented through generator knowledge.

RCRA Subpart CC did apply to the following hazardous waste storage and treatment tanks: T-Tanks 1,2,5,6,9 and 10; FAT-Tanks 3 and 5; and the Lab Tank. Those tanks are inspected as required by the permit for Subpart CC Tank Air Emissions Inspections on the Semi-Annual Inspection Report, and the inspection results were sufficient. Also, Vickery inspects the Scrubber protectoseal (conservation vent) as part of their Tank Air Emissions Inspection for the Semi-Annual Inspection Report. Vickery did provide a documented maximum organic vapor pressure (MOVP) determination for the waste stream that the T-Tanks process. The first MOVP determination that was performed in 1996 indicated that the T-Tanks were operating under a MOVP of 2.96 kPa. The second MOVP determination that was performed in October 2000, to confirm the initial determination, indicated that the T-Tanks were operating under a MOVP of 0.91 kPa. The regulatory limit for level 1 Controls is at 5.2 kPa for tanks greater than 151 cubic meters or 40,000 gallons. The T-Tanks, which are greater than 151 cubic meters in volume (largest tanks at the facility) process the most volatile organics (no greater than 5% VOC) in any waste stream throughout the entire facility. The MOVP determinations performed verified that the tank Level 1 Controls that were in place were correctly determined.

Also, groundwater and post-closure care unit monitoring records were previously inspected for compliance as required by the permit.

There were internal communications and alarm systems in place at the facility to respond to all emergencies.

There were fire extinguishers throughout the facility that were inspected regularly.

Closing Conference

We summarized the results during the inspection. The inspection concluded at approximately 6:15 p.m.

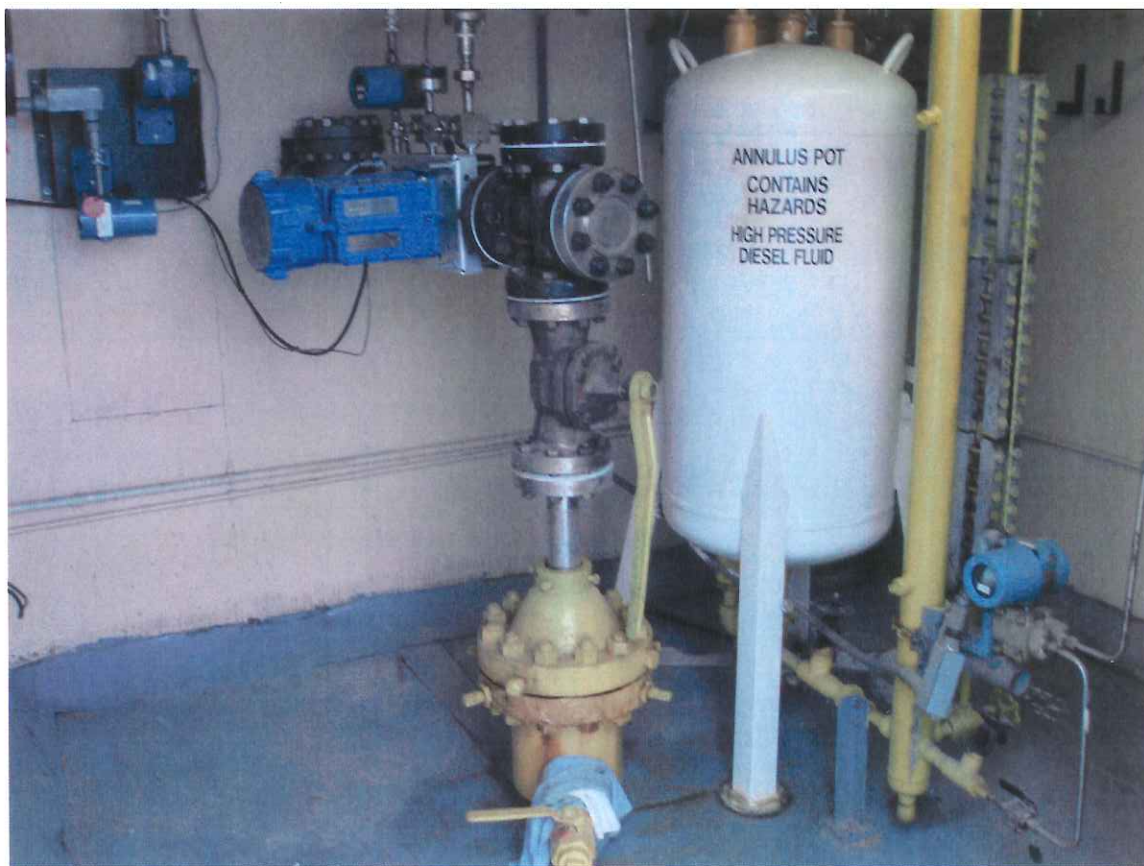
Documents received during this inspection are as follows:

- Copies of the MOVP determinations for hazardous waste treatment and storage T-Tanks
- A copy of Vickery's inspection schedule
- A copy of the Tank Air Emissions Inspection of the Semi-Annual Inspection Report
- A copy of page 728 of Vickery's approved current permit, which included the employee RCRA annual training portion and the definition of annual review of the initial training
- A copy of OEPA's daily inspection log performed by Ms. Miller

Documents given to Vickery during this inspection are as follows:

- U.S. EPA Small Business Resources handout (compliance assistance)

A photo log is attached consisting of seven (7) photos taken by U.S. EPA during the inspection.



1. A view of deepwell No. 4 and the Annulus Pot leak detection system

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07



2. A view of the aboveground piping run and leak detection system at the No. 4 deepwell and Pump House No. 2

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07



3. A view of the Caustic Scrubber System

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07



4. A view of the containment area for the T-Tanks

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07



5. A view of the signage on one of the T-Tanks

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07



6. A view of the top of the T-Tanks

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07



7. Another view of the containment area for the T-Tanks

Vickery Environmental, Inc., Vickery, OH
Bryan Gangwisch, U.S. EPA 9/26/07

OHIO EPA - DHWM - NWDO
VEI - DAILY INSPECTION LOG

INSPECTOR: Mary Ann Miller DATE: 9-26-07

WEATHER CONDITIONS

Time: 9:30 am Temp.: 70 °F Wind Direction: SW Speed: 4.0 mph
Description: _____ Precipitation during last 24 hours? Y/N
If "yes," what type of precipitation: cloudy + threatening rain

Note: Please note the time and details for any potential violations observed during inspections (ex., Any leaks or releases). Also, note any excessive precipitation accumulation.

NON-SPECIFIED ACTIVITIES (e.g., ground water sampling, contractor maintenance or construction, injection well MIT, tank replacement, etc.) Note: It is helpful to check all VEI visitor sign-in logs for contractor visits, etc.

USEPA Inspection- Bryan Gangwisch Gary Deutschman Steve Lonnenan Brett Miller	? label - T-Task Not Required
--	----------------------------------

MISCELLANEOUS INSPECTION AREAS

Perimeter fence secure & warning signs in place Y/N
 Date and time on video tape correct, and video recorder is operating..... Y/N
 Comments: _____

LABORATORY

Visible waste spills or leaks Y/N
 Waste drum properly closed, labeled and dated Y/N Accum. Date 9/11/07
 Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____
 Comments: _____

Pump Houses		Injection Wells	
	Pump House #2		Injection Well #4
Waste drum properly closed, labeled & dated	<u>Y/N</u>	Annulus (Seal) pressure	<u>750</u> psi
Accumulation date	<u>9/11/07</u>	Injection pressure	<u>310</u> psi
FAT tank leaks, spills, or air emissions	<u>Y/N</u>	Leaks observed	<u>Y/N</u>
Leaking piping, pumps or filter housings	<u>Y/N</u>	Diesel fuel level visible in seal pot sight glass	<u>Y/N</u>
Containment pad damage (e.g., cracks in corrosive resistant liner)	<u>Y/N</u>	Time Checked	
Time Checked	<u>10:01 am</u>	Time	<u>10:03 am</u>

Pump house # 2 & well #4 inspected at representative well/pump house set up. Remainder not inspected this date.

CAPILLARY DRAIN GROUND WATER TANK (non-hazardous waste tank)

Comments: _____

Capillary drain ground water leaking from piping or tank Y / N

Leaks reported to Vickery Manager (Name) _____ at (Time) _____

Injection Wells		Pump Houses	
Injection Well #5		Pump House #5	
Annulus (Seal) pressure	psi	Waste drum properly closed, labeled & dated	Y / N
Injection pressure	psi	Accumulation date	
Leaks observed	Y / N	FAT tank leaks, spills, or air emissions	
Diesel fuel level visible in seal pot sight glass	Y / N	Leaking piping, pumps or filter housings	Y / N
Time Checked		Containment pad damage (e.g., cracks in corrosive resistant liner)	Y / N
Time		Time Checked	

Pump Houses		Injection Wells (Last)	
Pump House #3		Injection Well #2	
Waste drum properly closed, labeled & dated	Y / N	Annulus (Seal) pressure	psi
Accumulation date		Injection pressure	psi
FAT tank leaks, spills, or air emissions	Y / N	Leaks observed	Y / N
Leaking piping, pumps or filter housings	Y / N	Diesel fuel level visible in seal pot sight glass	Y / N
Containment pad damage (e.g., cracks in corrosive resistant liner)	Y / N	Time Checked	
Time Checked		Time	

Pump Houses		Injection Wells	
Pump House #1		Injection Well #6	
Waste drum properly closed, labeled & dated	Y / N	Annulus (Seal) pressure	psi
Accumulation date		Injection pressure	psi
FAT tank leaks, spills, or air emissions	Y / N	Leaks observed	Y / N
Leaking piping, pumps or filter housings	Y / N	Diesel fuel level visible in seal pot sight glass	Y / N
Containment pad damage (e.g., cracks in corrosive resistant liner)	Y / N	Time Checked	
Time Checked		Time	

MAINTENANCE SHOP

Visible used oil or waste spills/leaks Y (N) Used oil storage area acceptable? (Y) / N

Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____

Waste drum properly closed, labeled and dated (Y) N Accum. Date: 9/11/01

Comments: _____

FILTER BUILDING #1

Visible waste spills/leaks Y ☒ N
 Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____
 Waste drum properly closed, labeled and dated Y / N Accum. Date: 9/11/07
 Containment pad damage (e.g., cracks in corrosive resistant liner) Y ☒ N
 Comments: _____

Note: When inspecting for visible waste spills or leaks, be sure to inspect assorted waste piping and also the two waste transfer/filter press booster pumps that are located on the floor in the southeast corner of Filter Building #1.

FILTER BUILDING #2

Visible waste spills/leaks Y ☒ N
 Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____
 Waste drum properly covered, labeled and dated Y / N Accum. Date: 9/11/07
 Containment pad damage (e.g., cracks in corrosive resistant liner) Y ☒ N
 Roll-off box containing waste is covered when not in use. Y ☒ N
 Comments: _____

On-Site Roll-Off Box Log (Less than 90 Days' Accumulation) (Filter Bldg. #2 / Pad)				
Box ID#	Empty / Full	Location	Leaking	Accum. Date
VK14	MT / <input checked="" type="radio"/> Full	Bldg. #2 / Pad	Y / <input checked="" type="radio"/> N	<u>9/15/07</u>
VK11	<input checked="" type="radio"/> MT / Full	<input checked="" type="radio"/> Bldg. #2 / Pad	Y / <input checked="" type="radio"/> N	
204/264	<input checked="" type="radio"/> MT / Full	<input checked="" type="radio"/> Bldg. #2 / Pad	Y / <input checked="" type="radio"/> N	
VK09	<input checked="" type="radio"/> MT / Full	<input checked="" type="radio"/> Bldg. #2 / Pad	Y / <input checked="" type="radio"/> N	<u>8/5/07</u>
VK01	<input checked="" type="radio"/> MT / Full	Bldg. #2 / <input checked="" type="radio"/> Pad	Y / <input checked="" type="radio"/> N	
204/252D	<input checked="" type="radio"/> MT / Full	Bldg. #2 / <input checked="" type="radio"/> Pad	Y / <input checked="" type="radio"/> N	
VK07	<input checked="" type="radio"/> MT / Full	Bldg. #2 / <input checked="" type="radio"/> Pad	Y / <input checked="" type="radio"/> N	
VK15	<input checked="" type="radio"/> MT / Full	Bldg. #2 / <input checked="" type="radio"/> Pad	Y / <input checked="" type="radio"/> N	
VK04	<input checked="" type="radio"/> MT / Full	Bldg. #2 / <input checked="" type="radio"/> Pad	Y / <input checked="" type="radio"/> N	<u>9/24/07</u>
Non-Haz 31244	<input checked="" type="radio"/> MT / Full	in process Bldg. #2 / Pad <input checked="" type="radio"/> Other	Y / <input checked="" type="radio"/> N	
VK12	<input checked="" type="radio"/> MT / Full	in process Bldg. #2 / Pad <input checked="" type="radio"/> Other	Y / <input checked="" type="radio"/> N	

Area betwn V-Tank to T-Tank line

Aisle space adequate ☒ Y / N
 Accumulation dates over 90 days Y / ☒ N
 Containers closed, labeled & dated ☒ Y / N
 Comments: _____

Leaking Roll-Off Box Information (if Incident # assigned, fill out Incident Report Log below)			
Box #	Location of & Reason for Leak	Amount	Incident #

Leaking roll-off(s) reported to Vickery Manager (Name) _____ at (Time) _____

T-TANKS

Visible waste spills/leaks Y/N ☒
Leaks/emissions reported to Vickery Manager (Name) _____ at (Time) _____
Containment pad damage (e.g., cracks in corrosive resistant liner) Y/N ☒
Visible air emissions from tanks Y/N ☒
Comments: _____

Precipitation accumulation Y/N
Greater than 24 hours (see previous logs) Y/N
Precipitation accumulation in NW sump Y/N ☒
If "yes," is pump operating Y/N ☒
Precipitation accumulation in SW sump Y/N
If "yes," is pump operating Y/N
Precipitation accumulation in SE pump Y/N
If "yes," is pump operating Y/N

T-TANK PUMP HOUSE (Pump labels are below the switch at each pump)		
PUMP	UNDER REPAIRS	LEAKING
T-2X	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-2R	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-1R	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-1X	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-6X	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-6R	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-5R	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-5X	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-10X	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-10R	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-9R	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>
T-9X	Y/N <input checked="" type="radio"/>	Y/N <input checked="" type="radio"/>

Waste drum closed, labeled & dated Y/N ☒ Accum. Date 9/11/07
Liquid accumulation in South sump Y/N ☒ If "yes," is pump operating Y/N ☒
Liquid accumulation in North sump Y/N ☒ If "yes," is pump operating Y/N ☒
Visible waste spills or leaks Y/N ☒ Containment pad damage Y/N ☒
Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____
Comments: _____

TRAILERS STAGING AREA – Parking Lot Located Around Perimeter of Unloading Building

Total number of tankers in staging area: 1
Visible waste spills or leaks Y/N ☒
Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____
Comments: _____

On-Site Roll-Off Box Log (Less than 90 Days' Accumulation) (Unloading Bldg.)				
Box ID#	Empty / Full	Location	Leaking	Accum. Date
VK05	MT / Full	Other	Y / N	
VK07a	MT / Full	Other	Y / N	
	MT / Full	Other	Y / N	
	MT / Full	Other	Y / N	

Aisle space adequate Y / N
Accumulation dates over 90 days Y / N
Containers closed, labeled & dated Y / N
Comments: _____

Leaking Tanker Information (if Incident # assigned, fill out Incident Report Log below)			
Box #	Location of & Reason for Leak	Amount	Incident #

Leaking roll-off(s) reported to Vickery Manager (Name) _____ at (Time) _____

SCRUBBER

Detectable odor Y / N Visible stack release other than steam Y / N
Leaking from scrubber or scrubber piping Y / N
Leaks reported to Vickery Manager (Name) _____ at (Time) _____
Containment pad damage (e.g., cracks in corrosive resistant liner) Y / N
Comments: _____

SAMPLING BAY (Between Unloading Bay & V-Tank Vault)

Waste leaking from pipes, hoses or Thief Pole Rinsing System Tank Y / N
Visible waste spills or leaks on the concrete or asphalt containment pads Y / N
Waste leaks or spills reported to Vickery Manager (Name) _____ at (Time) _____
Containment pad damage (e.g., cracks in corrosive resistant liner) Y / N
Comments: _____

V-TANKS

Detectable odor Y / N Visible waste spills or leaks Y / N
Odor / Leaks reported to Vickery Manager (Name) _____ at (Time) _____
Ground water infiltrating concrete wall in North half of V-Tank vault Y / N
Ground water infiltrating concrete wall in South half of V-Tank vault Y / N
Comments: _____

UNLOADING BAY

Containers closed and labeled ☒ Y / ☐ N
Accum. date on 55-gallon drum 9/22/01 Visible waste spills or leaks ☒ Y / ☐ N
Spills or leaks reported to Vickery Manager (Name) _____ at (Time) _____
Containment pad damage (e.g., cracks in corrosive resistant liner) ☒ Y / ☐ N
Comments: _____

CONTROL ROOM

- A. Work orders reviewed in control room? ☒ Y / ☐ N
B. Incident Report Log reviewed in control room? ☒ Y / ☐ N
Record any new incidents since the last inspection in the Incident Report Log area below.
C. Landfill leachate & capillary drain data reviewed in control room? ☒ Y / ☐ N
D. Process flow display panel lights reviewed in control room? ☒ Y / ☐ N
E. Do the process flow display panel lights indicate that there are any problems? ☒ Y / ☐ N
(e.g., a light on the panel will illuminate if any liquids are being detected in the secondary walls of any V-Tanks)
F. Any problems noted while reviewing information related to above items A. through E.? ☒ Y / ☐ N

Comments on above items A. -- E.

--

CONTROL ROOM COMPUTER SCREENS				Time <u>11:30am</u>
2	4	5	6	Injection Wells
<u>844.5</u> psi	<u>876.2</u> psi	<u>503.2</u> psi	<u>471</u> psi	Seal (Annulus) Pressure (red)
<u>336.8</u> psi	<u>313.2</u> psi	<u>54.1</u> psi	<u>0</u> psi	Injection Pressure (green)
<input checked="" type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	<input checked="" type="radio"/> Y / <input type="radio"/> N	Seal Pot Level >0% (purple)

Are the field readings for the annulus and injection pressures noted at the injection wells similar to their respective readings on the computer screens in the control room? ☒ Y / ☐ N

Are the annulus (seal) pressures all greater than their respective injection pressures? ☒ Y / ☐ N

INCIDENT REPORT LOG (Information available in control room)

Incident #	Date	Time Reported to Ohio EPA	Location & Details	Amount Spilled

Note: Additional Information for Leaker must be filled out in Rejected/Leaking Load Log above.

TRAILERS STAGING AREA – Parking Lot Located South of Closure Cell

Total number of tankers in staging area: 10

Visible waste spills or leaks Y / (N)

Spills or leaks reported to Vickery Manager (Name)_____ at (Time)_____

Comments: _____

[illegible]

REJECTED / LEAKING LOAD LOG (If Generator or Transporter is foreign, write "foreign" in ID# boxes)						
Rejected / Leaking	Date	Time Reported to Ohio EPA	Generator ID#	Transporter ID#	Manifest Doc. #	Profile #
R / L						
R / L						
R / L						

[illegible]

VICKERY ENVIRONMENTAL INC.
OHD020273819
03-72-0191

STATE PART B HAZARDOUS WASTE PERMIT
INSPECTION CHECKLIST

U.S. EPA Region V
September 26, 2007

OHIO PART B PERMITTED FACILITY

RCRA INSPECTION CHECKLIST

Facility: Vickery Environmental, Inc. Ohio Permit: 03-72-0191
Address: 3956 State Route 412 USEPA ID: OHD020273819
Vickery, Ohio 43464
County: Sandusky County Facility Phone: 419.547.7791
Inspection Date: Sept. 26, 2007
Time: 9:25 a.m. - 6:15 p.m.

Advance notice of inspection given? (yes) _____ (no) X

If so, how far in advance?

	<u>Name</u>	<u>Agency/Title</u>	<u>Phone</u>
Inspectors:	Mary Ann Miller	Ohio EPA	419.547.6033
	Gary Deutschman	Ohio EPA	419.373.3056
	<i>Bryan Gangwisch</i>	<i>U.S. EPA</i>	<i>312.886.0989</i>
Facility:	Steve Lonneman	Vickery	419.547.7791
	Brett Miller	Vickery	419.547.7791

Is facility operating as a generator? (yes) X (no)

If so, complete the applicable sections of the Generator Requirements checklist for wastes being managed under generator status.

PERMIT STATUS

Permit Issued: October 24, 1994
Permit Effective Date: October 24, 1994
Permit Renewal Date: August 17, 2001
Permit Expiration Date: August 17, 2011

AUTHORIZED ACTIVITIES

STORAGE

☐ Container
☒ Tank
☐ Waste Pile
☐ Surface Impoundment
(closure)

TREATMENT

☐ Incinerator
☐ Thermal Treatment
☒ Tank
☒ Miscellaneous Treatment
(filtration)

DISPOSAL

☐ Surface Impoundment
☐ Landfill
☒ Injection Well
☐ Land Application

Y/N/NA

RMK#

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

GENERAL CONDITIONS OF PERMIT

GENERAL PERMIT COMPLIANCE AND ACTIVITIES

1. Is the expiration date of the permit passed? If so, Yes___No_x_N/A___
- (a) Is the Permittee continuing any activity regulated by the permit after the expiration date of the permit? Yes___No___N/A_x___
- (b) Has the facility submitted an application for a permit renewal to the Director no later than (180) days prior to the expiration date of the permit? (or upon a later date if the Permittee can demonstrate good cause for late submittal) [Condition A.6.(a)] Yes___No___N/A_x___
- NOTE:** The Permittee may continue to operate in accordance with the terms and conditions of the expired permit until a renewal permit is issued or denied if:
- (i) The Permittee has submitted a timely and complete application for a renewal permit under O.A.C. Rule 3745-50-40, and;
- (ii) Through no fault of the Permittee, a new permit has not been issued pursuant to O.A.C. Rule 3745-50-40 on or before the expiration date of the permit. [Condition A.6.(b)]
2. Has the Permittee submitted the annual permit fee, payable to Treasurer of the State, to the Ohio EPA on or before the anniversary of the date of issuance during the term of the permit [Condition A.26.]? Yes_x_No___N/A___
3. Is the Permittee conducting any hazardous waste management activities (not otherwise exempt by law) which are not authorized by the permit [Condition A.1.(b) and A.5]? Yes___No_x_N/A___
4. Have any provisions of the permit been identified as invalid? [Condition A.4] Yes___No_x_N/A___
5. In circumstances where the Permittee has needed to unload waste during "off hours" (from 11:00 p.m. to 7:00 a.m.):
Has prior notice been provided to Ohio EPA, NWDO? [Condition A.30.] Yes___No___N/A_x___
6. Has the facility identified any instances of noncompliance with the permit, R.C. Chapter 3734 or the rules adopted thereunder, which may endanger human health or the environment? If so, Yes___No_x_N/A___
- (a) Did the facility report the incident to Ohio EPA's Division of Emergency and Remedial Response within two hours from becoming aware of the circumstances? [Condition A.21.(a)] Yes___No___N/A_x___

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(b) After initial notification, did the facility immediately report to Ohio EPA's Emergency Response Section any subsequent changes in the situation as conditions warranted until such time as all information as required by Condition A.21.(b) was submitted?	Yes___ No <input type="checkbox"/> N/A_x	_____
NOTE: See Condition A.21.(b) for the specific information the Permittee is required to report.		
7. Did the Permittee provide a written report to the Ohio EPA Emergency Response Section and DHWM, NWDO within (5) days of the time the Permittee became aware of the circumstances reported in Question 6? [Condition A.21.]	Yes___ No <input type="checkbox"/> N/A_x	_____
If so, did the report contain:		
(a) A description of the noncompliance (including exact dates and times)?	Yes___ No <input type="checkbox"/> N/A_x	_____
(b) Whether the noncompliance has been corrected and if not, the anticipated time noncompliance is expected to continue? and;	Yes___ No <input type="checkbox"/> N/A_x	_____
(c) Steps taken or planned to minimize the impact on human health and the environment and to reduce and prevent recurrence of the noncompliance?	Yes___ No <input type="checkbox"/> N/A_x	_____
NOTE: The Permittee need not comply with the five day written report requirement if the Director, upon good cause shown by the Permittee, waives that requirement and the Permittee submits a written report within fifteen days of the time the Permittee becomes aware of the circumstances. [Condition A.21.(c)]		
8. Has the Permittee expeditiously taken all steps necessary to minimize or correct any adverse impact on the environment or public health resulting from noncompliance with the permit? [Condition A.8.]	Yes___ No <input type="checkbox"/> N/A_x	_____
9. Has the Permittee identified any other instances of noncompliance not provided for in Question #6?	Yes___ No_x N/A	_____
(a) If so, did the Permittee report these instances to the Ohio EPA, DHWM within (30) days of becoming aware of the noncompliance? [Condition A.22.]	Yes___ No <input type="checkbox"/> N/A_x	_____
(b) Do the reports provided contain the information set forth in Condition A.20? [Condition A.22.]	Yes___ No <input type="checkbox"/> N/A_x	_____
(c) Has the Permittee expeditiously taken all steps necessary to minimize or correct any adverse impact on the environment or public health resulting from noncompliance with the permit? [Condition A.8.]	Yes___ No <input type="checkbox"/> N/A_x	_____
10. Has the Permittee planned any changes in the permitted facility or activity which may result in noncompliance with the conditions of the permit?	Yes___ No_x N/A	_____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

(a) If so, has the facility provided Ohio EPA with advance notice of such changes? [Condition A.15.]

Yes ___ No ☐ N/A ☒ ___

NOTE: Such notification does not waive the Permittee's duty to comply with the permit pursuant to Condition A.5. and A.15.

PERMIT MODIFICATION, REVISION, REVOCATION

11. Has the Permittee filed a request for a permit modification, revision or revocation since issuance of the permit? [Condition A.2.]

Yes ☒ No ___ N/A ___

12. Has the permit been transferred to a new owner or operator? [Condition A.18.]

Yes ___ No ☒ N/A ___

(a) If so, has the transfer been conducted in accordance with R.C. Chapter 3734 and the rules adopted thereunder? [Condition A.18.(a)] and;

Yes ___ No ☐ N/A ☒ ___

(b) Before transferring ownership did the Permittee notify the new owner in writing of the requirements of R.C. Chapter 3734 and the rules adopted thereunder and the applicable Ohio hazardous waste rules? [Condition A.18.(a)]

Yes ___ No ☐ N/A ☒ ___

NOTE: The Permittee's failure to notify the new owner or operator of the requirements of the applicable Ohio law or hazardous waste rules does not relieve the new owner or operator of its obligation to comply with all applicable requirements. [Condition A.18.(b)]

13. Has the Permittee submitted reports of compliance or non-compliance with, or any progress reports on the requirements contained in any compliance schedule of the permit to the Ohio EPA no later than (14) days following each scheduled date, unless otherwise specified? [Condition A.19.]

Yes ___ No ☐ N/A ☒ ___

14. Has the Permittee furnished relevant information which the Ohio EPA has requested to determine whether cause exists for modifying, revising, revoking or suspending the permit, or to determine compliance with the permit? [Condition A.10.]

Yes ☒ No ☐ N/A ___

15. Has the facility furnished Ohio EPA, upon request, with copies of records required to be kept by the permit? [Condition A.10]

Yes ☒ No ☐ N/A ___

16. Has the Permittee become aware that it failed to submit any relevant facts in the permit or issuance proceedings or that it submitted incorrect or incomplete information in permit issuance proceedings or other submissions to Ohio EPA or the HWFB? If so,

Yes ___ No ☒ N/A ___

(a) Has the Permittee promptly submitted such facts or corrected information to the appropriate entity? [Condition A.24.]

Yes ___ No ☐ N/A ☒ ___

17. Is the Permittee maintaining records of all data used to complete the

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
approved application and any amendments, supplements, revisions or modifications to the application? [Condition A.14.(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
18. Is the Permittee retaining a complete copy of the approved application on-site? [Condition A.14.(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
19. Is the Permittee planning any physical alterations or additions to the permitted unit(s)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) If so, has the Permittee given notice to the Director of such alterations/additions? [Condition A.15.]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(b) Have such changes been made in accordance with O.A.C. Rule 3745-50-51? [Condition A.15.]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
SITE ENTRY - AVAILABILITY OF RECORDS		
20. As specified in Condition A.11, has the Permittee allowed the Director or an authorized representative, upon proper identification and upon stating the purpose and necessity of an inspection, to:		
(a) Enter at reasonable times upon the premises where a regulated activity is located or where records are kept under the conditions of the permit? [Condition A.11.(a)(i)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(b) Have access to and copy any records required to be kept under the conditions of the permit? [Condition A.11.(a)(ii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(c) Inspect and photograph at reasonable times facilities, equipment (including control and monitoring equipment), practices or other operations regulated under the conditions of the permit? [Condition A.11.(a)(iii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(d) Sample or monitor any substance or parameter at any location of the facility to assure compliance with the permit or as otherwise authorized by R.C. Chapter 3734 and the rules adopted thereunder? [Condition A.11.(a)(iv)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
21. Has the permittee furnished Ohio EPA with requested records and retained requested records at the facility? [Condition B.21.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

RECORDKEEPING REQUIREMENTS

CONFIDENTIALITY

1. Has the Permittee requested confidentiality of any information of the permit in accordance with R.C. Chapter 3734 and the rules adopted thereunder? [Condition A.25.]

Yes___No ☒ N/A___

OPERATING RECORD

2. Is the Permittee maintaining a written operating record at the facility as set forth in O.A.C. Rules 3745-54-73 and 3745-54-74 which contains the following elements: [Condition B.22.]

(a) A description and the quantity of each hazardous waste received?

Yes ☒ No ☐ N/A___

(b) Method(s) and date(s) of treatment, storage or disposal at the facility?

Yes ☒ No ☐ N/A___

(c) The location of each hazardous waste within the facility and the quantity at each location?

Yes ☒ No ☐ N/A___

3. Is the Permittee maintaining, until closure is complete and certified, the following documents and amendments, revisions and modifications to these documents: [Condition A.28.]

(a) Waste analysis plan in accordance with O.A.C. Rule 3745-54-13 and the conditions of the permit? [Condition A.28.(a)(i)]

Yes ☒ No ☐ N/A___

(b) Contingency plan in accordance with O.A.C. Rule 3745-54-53 and the conditions of the permit? [Condition A.28.(a)(ii)]

Yes ☒ No ☐ N/A___

(c) Closure plan in accordance with O.A.C. Rule 3745-55-12 and the conditions of the permit? [Condition A.28.(a)(iii)]

Yes ☒ No ☐ N/A___

(d) Post-Closure plan as required by O.A.C. Rule 3745-55-18(A) and the conditions of the permit? [Condition A.28.(a)(viii)]

Yes ☒ No ☐ N/A___

(e) Cost estimate for facility closure in accordance with O.A.C. Rule 3745-55-42 and the conditions of the permit? (estimate only - adequacy of estimate will be evaluated by C.O. financial assurance personnel) [Condition A.28.(a)(iv)]

Yes ☒ No ☐ N/A___

(f) Personnel training plan and records required by O.A.C. Rule 3745-54-16 and the conditions of the permit? [Condition A.28.(a)(v)]

Yes ☒ No ☐ N/A___

(g) Inspection schedules developed in accordance with O.A.C. Rules 3745-54-15 and O.A.C. Rule 3745-55-74 and the conditions of the permit? [Condition A.28.(a)(vii)]

Yes ☒ No ☐ N/A___

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(h) Annually-adjusted cost estimate for facility closure required by O.A.C. Rule 3745-55-42 and O.A.C. Rule 3745-55-44 and the conditions of the permit? [Condition A.28.(a)(ix)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(i) Operating record required by O.A.C. Rule 3745-54-73 and the conditions of the permit? [Condition A.28.(a)(vi)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(j) All other documents by the permit? [Condition A.28.(a)(x)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
4. Have any of the documents identified in Question #3 been revised as required by the permit? If so,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) Has the Permittee submitted the revisions to the Ohio EPA? [Condition A.28.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(b) Has the Permittee received approval in accordance with Ohio hazardous waste rules to make such changes? [Condition A.28.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
5. Is the Permittee maintaining copies of all inspection logs at the facility for a period of at least three years from date of inspection? [Condition A.28.(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
6. Is the Permittee maintaining Corrective Action reports and records as required by Condition E.5. and E.8? [Condition A.28.(d) and A.14.(e)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) Are these reports and records being maintained for at least 3 years after all activities have been completed? [Condition A.28.(d) and A.14.(e)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
7. Is the Permittee maintaining records for all groundwater monitoring wells and associated ground water surface elevations for the active life of the facility? [Condition A.14.(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
8. Has the Permittee maintained all monitoring information, including calibration and maintenance records, copies of all reports and records required by this permit, the certification required by OAC 3745-54-73(B)(9), and records of all data used to complete the application for this permit, for a period of at least three years? [Condition A.14.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

ANNUAL REPORT REQUIREMENT

9. Is the Permittee complying with annual report requirements set forth in O.A.C. Rule 3745-54-75 and the additional report requirements set forth in O.A.C. Rule 3745-54-77 and the conditions of the permit? [Condition B.25.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	__1__
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Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

SAMPLING/MONITORING RECORDKEEPING REQUIREMENTS

10. In compliance with Condition A.12.(b) of the permit, do the Permittee's records of monitoring information specify the:

(a) Date(s), exact place(s), and time(s) of sampling or measurements?

Yes ☒ No ☐ N/A ☐

(b) Individual(s) who performed the sampling or measurements?

Yes ☒ No ☐ N/A ☐

(c) Date(s) analyses were performed?

Yes ☒ No ☐ N/A ☐

(d) Individual(s) who performed the analyses?

Yes ☒ No ☐ N/A ☐

(e) Analytical technique(s) or method(s) used?

Yes ☒ No ☐ N/A ☐

(f) Results of such analyses?

Yes ☒ No ☐ N/A ☐

11. Have the methods used to obtain a representative sample of the waste to be analyzed included the appropriate SW-846 method or an equivalent method specified in the approved waste analysis plan? [Condition A.12.(a)]

Yes ☒ No ☐ N/A ☐

12. Has Ohio EPA requested submittal of any reports or other information required by the conditions of the permit from the Permittee? If so,

Yes ☒ No ☐ N/A ☐

(a) Have the submittals been signed and certified according to O.A.C. Rule 3745-50-42? [Condition A.13.]

Yes ☒ No ☐ N/A ☐

WASTE MINIMIZATION REQUIREMENTS

13. Did the Permittee submit a current executive summary of the waste minimization and treatment plan within 180 days of journalization of the permit?

Yes ☒ No ☐ N/A ☐

(a) Has the Permittee submitted a Waste Minimization Report to Ohio EPA meeting the requirements of Condition A.29. of the permit every three years. [Condition A.29]

Yes ☒ No ☐ N/A ☐ 2

OFF-SITE SHIPMENTS/MANIFEST REQUIREMENTS

1. Is all hazardous waste transported from the facility by a properly registered transporter of hazardous waste in accordance with all applicable laws, rules and standards? [Condition A.16.]

Yes ☒ No ☐ N/A ☐

2. Is the Permittee complying with the following manifest requirements set forth in O.A.C. Chapter 3745-52 and O.A.C. Rules 3745-54-70, 3745-54-71, 3745-54-72 and 3745-54-76: [Condition B.24.]

(a) All hazardous wastes shipped off-site have been accompanied by a completed manifest, USEPA form 8700-22 and, if necessary, USEPA form 8700-22A in compliance with O.A.C. Rule 3745-52-20(A)?

Yes ☒ No ☐ N/A ☐

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(b) The manifest form used contains all information required by O.A.C. Rule 3745-52-20 and the minimum number of copies required by O.A.C. Rule 3745-52-22?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(c) The facility has designated at least one permitted disposal facility and has/will designate an alternate facility or instructions to return waste in compliance with O.A.C. Rule 3745-52-20(C)(D)(E)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(d) Prepared manifests have been signed by the facility and initial transporter in compliance with O.A.C. Rule 3745-52-23?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
3. Has the Permittee received a return copy of each completed manifest within (35) days of the date the waste was accepted by the initial transporter?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(a) If not, has the Permittee complied with the manifest exception reporting requirements of O.A.C. Rule 3745-52-42?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	
4. Has the Permittee discovered a significant discrepancy in a manifest since the date of last inspection? If so,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(a) Did the Permittee reconcile the discrepancy within (15) days?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(b) If the discrepancy was not reconciled within (15) days: Did the Permittee submit a manifest discrepancy report along with a copy of the manifest to the Director in accordance with O.A.C. Rule 3745-54-71? [Condition B.24.(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	
5. Has the Permittee accepted any hazardous waste from off-site without a manifest since the date of last inspection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(a) If so, did the Permittee submit an unmanifested waste report to the Director within (15) days of receipt of the waste? [Condition B.24.(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
6. Are signed copies of all hazardous waste manifests and any documentation required for exception reports retained for at least three years at the facility as required by O.A.C. Rule 3745-52-40?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
7. Has the Permittee received any hazardous waste on-site from a foreign source? If so,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(a) Did the Permittee notify the Director in writing at least four weeks in advance as required by O.A.C. Rule 3745-54-12(A)? [Condition B.2.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
NOTE: Notice of subsequent shipments of the same waste from the same foreign source is not required. [Condition B.2.(a)]		
8. Has the Permittee received waste from an off-site source? If so,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
(a) Did the Permittee inform the generator that the facility has the appropriate		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
permits to accept the waste which is being shipped? [Condition B.2.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(b) Is the Permittee maintaining a copy of the written notice(s) as part of the operating record? [Condition B.2.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

NOTE: The above requirements are not applicable if the Permittee is also the off-site generator. [See Condition B.2.(b)]

GENERAL REQUIREMENTS

9. Does the Permittee have a detailed chemical and physical analysis of waste streams which contains all information which is necessary to properly treat, store or dispose of the waste in accordance with O.A.C. Chapters 3745-54 to 3745-57 and Condition B.3 of the permit? [3745-54-13(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
10. Since the last inspection, were there any wastes generated by the facility which were unable to be characterized through process knowledge? If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) Were the waste analysis procedures described in Appendix 1 of the approved permit application followed?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
11. Is the Permittee following the procedures described in the approved waste analysis plan (Appendix 1 of approved permit application) and the requirements of O.A.C. Rule 3745-54-13? [Condition B.3.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
12. Is the Permittee using a contract laboratory?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) If so, has the permittee informed the laboratory in writing that it must operate under the waste analysis conditions set forth in the permit? [Condition B.3.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

WASTE ANALYSIS

QUALITY ASSURANCE REQUIREMENTS

1. Is the Permittee verifying the analysis of each waste stream annually as part of its quality assurance program in accordance with SW-846? [Condition B.3.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
2. In accordance with Condition B.3. of the permit, does the Permittee's quality assurance plan ensure that the Permittee is, at a minimum: [Condition B.3.]		
(a) Maintaining proper functional instruments?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(b) Using approved sampling/analytical methods?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(c) Verifying the validity of sampling and analytical procedures and performance of correct calculations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

WASTE PROFILES

3. Prior to accepting a waste stream does the Permittee obtain:

(a) Generator name, US EPA identification number, profile number? [Condition B.3.(a)(i)]

Yes ☒ No ☐ N/A ☐

(b) Common or generic name of the hazardous waste? [Condition B.3.(a)(ii)]

Yes ☒ No ☐ N/A ☐

(c) Process generating the hazardous waste or the source of the hazardous waste? [Condition B.3.(a)(iii)]

Yes ☒ No ☐ N/A ☐

(d) Physical description of the hazardous waste? [Condition B.3.(a)(iv)]

Yes ☒ No ☐ N/A ☐

(e) Major chemical or physical components of the hazardous waste by percent of the component per 100 percent of the hazardous waste? [Condition B.3.(a)(v)]

Yes ☒ No ☐ N/A ☐

(f) Documentation supporting the generator's knowledge of the waste, analytical data, or a combination of the two which adequately characterizes the waste such that it may be treated, stored, or disposed of in accordance with this permit, Chapters 3745-54 to 57, 3745-218 and 3745-270 of the Ohio Administrative Code? [Condition B.3.(a)(vi)]

Yes ☒ No ☐ N/A ☐

(g) RCRA hazardous waste description? [Condition B.3.(a)(vii)]

Yes ☒ No ☐ N/A ☐

(h) Specific handling instructions needed to manage the waste in accordance with the permittee's permit? [Condition B.3.(a)(viii)]

Yes ☒ No ☐ N/A ☐

(i) Date and signature of the generator certifying that the information is correct? [Condition B.3.(a)(ix)]

Yes ☒ No ☐ N/A ☐

NEW WASTE MANAGEMENT PROCEDURES

4. Has the Permittee initiated a new procedure for nitric acid? [Condition B.42]

Yes ☐ No ☒ N/A ☐

(a) If so, did the permittee notify the Ohio EPA prior to initiating the new waste management procedures?

Yes ☐ No ☐ N/A ☒

NITRIC ACID WASTE STREAM/SPECIAL REQUIREMENTS

5. Upon receipt of nitric acid waste streams at the facility, is the Permittee

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Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

complying with the following procedures as outlined in Condition B.43.:

(a) Does the lab assess the millivolt potential to determine the compatibility of the waste stream to the storage tank?

Yes ☒ No ☐ N/A _____

(b) Prior to blending nitric acid streams, approval is obtained from the lab manager or his/her qualified designee?

Yes ☒ No ☐ N/A _____

(i) If an approval signature cannot be obtained prior to blending: The verbal approval of the lab manager or designee is obtained and the Waste Compatibility Worksheet is signed the next working day?

Yes ☒ No ☐ N/A _____

ACCEPTANCE OF "P" WASTE CODES

6. Has the Permittee received approval from Ohio EPA prior to receipt of any "P-coded" waste streams in accordance with ORC 3734.141 and Condition B.4. of the permit?

Yes ☒ No ☐ N/A _____

NOTE: The Permittee may only accept P-coded waste streams that follow the derived from or carry through provisions or that the Permittee can render innocuous prior to deep well injection. Approval of a waste stream by Ohio EPA as part of the Waste Product Review satisfies all notification requirements of ORC 3734.141. [Condition B.4.]

LAND DISPOSAL RESTRICTIONS

GENERAL REQUIREMENTS FOR LAND DISPOSAL RESTRICTIONS

1. Did the Permittee comply with all regulations regarding land disposal prohibitions and restrictions as required by O.A.C. 3745-270 [Condition B.40.(a)]

Yes ☒ No ☐ N/A _____

2. Does the Permittee mix restricted waste with nonrestricted waste? [OAC Rule 3745-270-03(A)]

Yes ☒ No ☐ N/A _____

(a) If so, is the mixture treated as a restricted waste? [OAC Rule 3745-51-03(B)(2)]

Yes ☒ No ☐ N/A _____

3. Does the Permittee dilute a restricted waste or a treatment residue from a restricted waste? [Condition B.40.(a) & OAC Rule 3745-270-03(A)]

Yes ☒ No ☐ N/A _____

(a) If so, is it done as a substitute for adequate treatment to achieve compliance with LDR treatment standards?

Yes ☐ No ☒ N/A _____

(b) If so, is it done to circumvent the effective date of a prohibition?

Yes ☐ No ☒ N/A _____

(c) If so, is it to avoid a prohibition in O.A.C. 3745-270-30 through 3745-270-35?

Yes ☐ No ☒ N/A _____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(d) If so, is it to avoid a prohibition imposed by Section 3004 of RCRA?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A _____	_____
4. Does the Permittee test any waste generated at the facility, or use knowledge of the waste, to determine if the waste is restricted from land disposal? [Condition B.40.(a) & OAC Rule 3745-270-07(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
5. Does the Permittee comply with all the applicable notification, certification and recordkeeping requirements described in O.A.C. Rule 3745-270-07? [Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
6. Does the Permittee comply with all the applicable prohibitions on storage of restricted waste as specified in O.A.C. Rule 3745-270-50 [Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
7. Did the Permittee store restricted wastes in tanks solely for the purpose of the accumulation of such quantities of hazardous wastes as necessary to facilitate proper recovery, treatment or disposal? [Condition B.40.(a) & OAC Rule 3745-270-50(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
(a) If so, was each tank clearly marked with a description of its contents, the quantity of each hazardous waste received, and the date each period of accumulation begins, or such information for each tank is recorded and maintained in the operating record at that facility?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
8. Has the Permittee stored restricted wastes for up to one year? [Condition B.40.(a) & OAC Rule 3745-270-50(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
(a) If so, was such storage for the sole purpose of accumulating such quantities necessary to facilitate proper recovery, treatment or disposal?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
9. Has the Permittee stored restricted wastes beyond one year? [Condition B.40.(a) OAC Rule 3745-270-50(C)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A _____	_____
(a) If so, was such storage for the sole purpose of accumulating such quantities necessary to facilitate proper recovery, treatment or disposal?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> _____	_____
10. Has the permittee stored any liquid containing PCBs at concentrations greater than or equal to 50 ppm? [Condition B.40.(a)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A _____	_____
(a) If so, was it stored according to 40 CFR 761.65(b) and removed from storage and treated or disposed as required by OAC Rule 3745-270-50(F) within one year?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> _____	_____

WASTE EVALUATION REQUIREMENTS

11. Has the facility adequately evaluated all wastes to determine if they are restricted from land disposal? [O.A.C. Rule 3745-270-07(A); Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
(a.) For determinations based solely on knowledge of the waste:		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
Is supporting data used to make this determination being retained on-site? [O.A.C. Rule 3745-270-07(A)(5); Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
(b.) For determinations based upon analytical testing: Is a copy of waste analysis data being retained on-site? [O.A.C. Rule 3745-270-07(A)(5); Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
12. Has the generator determined the correct "treatability group" for each waste restricted from land disposal (e.g. wastewater, non-wastewater, high arsenic, low arsenic, high zinc, low zinc, etc.)? [O.A.C. Rule 3745-270-07(A); Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
13. Has the generator correctly determined if restricted wastes meet or exceed treatment standards? [O.A.C. Rule 3745-270-07(A); Condition B.40.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
14. Does the entity generate any listed waste(s) which are restricted from land disposal? If so,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
(a) Do such wastes also exhibit hazardous waste characteristics as identified in O.A.C. Rules 3745-51-20 to 3745-52-24?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____
(b) For listed wastes which also exhibit a characteristic: Does the generator also identify the appropriate treatment standard for the constituent(s) which cause the waste to exhibit the characteristic(s)? [O.A.C. Rule 3745-270-09(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____	_____

NOTE: The generator is not required to identify the treatment standard for the characteristic if the listing covers the associated characteristic (e.g. a F019/D007 hazardous waste - F019 being listed due to chromium content and D007 being the characteristic waste code for chromium).
[See O.A.C. Rule 3745-270-09(B)]

NOTIFICATION/CERTIFICATION

15. For wastes that do not meet treatment standards: With the initial shipment of waste to each off-site treatment or storage facility, does the generator send a one-time written notice to each treatment or storage facility that indicates that the wastes being received do not meet the treatment standards? [OAC Rule 3745-270-07(A)(2); Condition B.40.(a)]

Yes ☒ No ☐ N/A _____

If so, does the notification include the following:

(a) EPA hazardous waste number? [O.A.C. Rule 3745-270-07(A)(2); Condition B.40.(a)]

Yes ☒ No ☐ N/A _____

(b) Appropriate treatment standard for the waste? [O.A.C. Rule 3745-270-07(A)(2); Condition B.40.(a)]

Yes ☒ No ☐ N/A _____

(c) The manifest number associated with the shipment of waste?

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

[O.A.C. Rule 3745-270-07(A)(2); Condition B.40.(a)]

Y/N/NA RMK#
Yes ☒ No ☐ N/A ☐ _____

(d) Waste analysis data, where available? [O.A.C. Rule 3745-270-07(A)(2); Condition B.40.(a)]

Yes ☒ No ☐ N/A ☐ _____

16. Is the one-time written notice identified in Question 16 submitted with the initial shipment of waste? [O.A.C. Rule 3745-270-07(A)(2); Condition B.40.(a)]

Yes ☒ No ☐ N/A ☐ _____

INSPECTION AND SECURITY

GENERAL INSPECTION REQUIREMENTS

1. Is the Permittee following the inspection procedures and schedules described in Appendix 2 of the approved permit application and the requirements of O.A.C. Rule 3745-54-15? [Condition B.6.]

Yes ☒ No ☐ N/A ☐ _____

2. Does the Permittee inspect the facility with such regularity as to identify problems resulting from deterioration, malfunctions, operator errors or discharges which may lead to a release of hazardous waste to the environment or a threat to human health? [O.A.C. Rule 3745-54-15(A)(1)(2)]

Yes ☒ No ☐ N/A ☐ _____

3. Is the Permittee following the approved inspection schedule for inspecting: monitoring equipment, safety equipment, emergency equipment, security devices and operating and structural equipment as specified in O.A.C. Rule 3745-54-15(1)?

Yes ☒ No ☐ N/A ☐ _____

(a) Is the schedule kept at the facility? [O.A.C. Rule 3745-54-15(B)(2)]

Yes ☒ No ☐ N/A ☐ _____

(b) Does the schedule identify the types of problems which are to be looked for during the inspection? [O.A.C. Rule 3745-54-15(B)(3)]

Yes ☒ No ☐ N/A ☐ _____

(c) Does the schedule include inspection of areas subject to spills daily when in use and according to other applicable regulations when not in use? [O.A.C. Rule 3745-54-15(B)(4)]

Yes ☒ No ☐ N/A ☐ _____

4. Does the Permittee remedy deterioration or any malfunctions discovered by an inspection as required by O.A.C. Rule 3745-54-15(C)? [Condition B.6.]

Yes ☒ No ☐ N/A ☐ _____

5. Is the Permittee maintaining records of inspections for a minimum of three years? [Condition B.6.]

Yes ☒ No ☐ N/A ☐ _____

6. In accordance with O.A.C. Rule 3745-54-15(D) and Condition B.6. of the permit, do inspection records contain the following information:

(a) Date and time of inspection?

Yes ☒ No ☐ N/A ☐ _____

(b) Signature of inspector?

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

(c) Notation of observations made?

(d) Date/nature of any repairs or other remedial actions?

Y/N/NA	RMK#
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

SECURITY PROVISIONS/FACILITY OPERATION

7. Is the Permittee complying with the security provisions of O.A.C. Rule 3745-54-14 and Section F of the approved permit application, including the following: [Condition B.5.]

(a) Does the Permittee have a 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility, or;

Yes ☒ No ☐ N/A ☐ _____

(b) An artificial or natural barrier (in good repair) which completely surrounds the active portion of the facility, or;

Yes ☒ No ☐ N/A ☐ _____

(c) A means to control entry, at all times, through gates or other entrances, to the active portion of the facility?

Yes ☒ No ☐ N/A ☐ _____

8. In accordance with O.A.C. Rule 3745-54-14(C), does the Permittee have signs reading "Danger-Unauthorized Personnel Keep Out" posted at each entrance and at other locations and in sufficient numbers to be seen when approaching the active portion of the facility? [Condition B.5.]

Yes ☒ No ☐ N/A ☐ _____

9. Is construction, maintenance and operation of the facility being conducted to minimize the possibility of a fire, explosion, or unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil ground or surface waters? [Condition B.1.(a)]

Yes ☒ No ☐ N/A ☐ _____

10. Is the Permittee maintaining adequate aisle space to allow for the unobstructed movement of equipment and personnel through the facility in the event of an emergency as required by O.A.C. Rule 3745-54-35? [Condition B.12.]

Yes ☒ No ☐ N/A ☐ _____

PERSONNEL TRAINING

11. Is the facility conducting personnel training in accordance with Section H, Appendix 4 of the approved permit application and the following requirements of O.A.C. Rule 3745-54-16: [Condition B.7.]

Yes ☒ No ☐ N/A ☐ _____

(a) The facility provides personnel training which includes instruction in safe equipment operation and emergency procedures and implementation of the contingency plan? [O.A.C. Rule 3745-54-

Yes ☒ No ☐ N/A ☐ _____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

16(A)(B)(C)]

(b) The facility provides personnel training to new employees within 6 months after their date of employment as required by O.A.C. Rule 3745-54-16(B)?

Yes x No ☐ N/A

(c) The facility provides an annual refresher training course as required by O.A.C. Rule 3745-54-16(B)? *Per permit language that defines annual as calendar year*

Yes x No ☐ N/A 3

12. Is the Permittee maintaining personnel training records as required by O.A.C. Rule 3745-54-16(D) and of the approved application, including; written job titles, job descriptions and documented employee training records? [Condition B.7.]

Yes x No ☐ N/A

REQUIRED EQUIPMENT

13. Is the Permittee, at a minimum, maintaining the equipment set forth in the approved permit application (Sections F and G and Appendix 3) at the facility? [Condition B.9.]

Yes x No ☐ N/A

14. Is the Permittee inspecting, testing and maintaining the equipment specified in Question #13 to assure its proper operation as specified in O.A.C. Rule 3745-54-33, the inspection plans and the approved permit application? [Condition B.10.]

Yes x No ☐ N/A

15. Whenever hazardous waste is being managed at the facility, has the Permittee provided all personnel involved in the operation with immediate access to an internal alarm or emergency communication device as required by O.A.C. Rule 3745-54-34 and Section F of the approved permit application? [Condition B.11.]

Yes x No ☐ N/A

CONTINGENCY PLAN REQUIREMENTS

EMERGENCY PROCEDURES

1. In compliance with Condition B.13.(a), does the Permittee:

(a) Familiarize the emergency response agencies likely to respond to an emergency at the facility with:

(i) The layout of the facility? [Condition B.13.(a)(i)]

Yes x No ☐ N/A

(ii) Properties of hazardous waste managed at the facility and associated hazards? [Condition B.13.(a)(iii)]

Yes x No ☐ N/A

(iii) Places where facility personnel will normally be working? [Condition B.13.(a)(i)]

Yes x No ☐ N/A

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(iv) Entrances to and roads inside the facility? [Condition B.13.(a)(i)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(iv) Evacuation routes as depicted in Section G of the permit application? [Condition B.13.(a)(i)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(vi) Inform emergency response agencies of safety equipment, supplies, proper emergency procedures that are applicable to the facility, and any further requirements imposed by the permit? and; [Condition B.13.(a)(ii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
(vii) Familiarize local ambulance services, fire depts., hospitals and any other local emergency services with the properties of hazardous waste managed at the facility and the types of injuries or illness which could result from fires, explosions or a release of hazardous wastes at the facility? [Condition B.13.(a)(iii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

EMERGENCY AUTHORITIES

2. Has a state or local agency declined to enter into the arrangements set forth in O.A.C. Rule 3745-54-37(A)? If so,	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
3. Has the Permittee documented the refusal in the operating record as required by O.A.C. Rule 3745-54-37(B)? [Condition B.13.(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
4. Has the Permittee, in accordance with O.A.C. Rule 3745-54-53 submitted a copy of the approved contingency plan (including amendments, revisions or changes) to all local authorities, agencies and response contractors designated in the approved contingency plan? [Condition B.18.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
5. Has the Permittee notified the agencies in Question #3, in writing, within (10) days of the effective date of any amendments or revisions to the plan? [Condition B.18.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
6. Has the Permittee submitted a copy of the approved contingency plan and all revisions, amendments and modifications to the Ohio EPA, Division of Emergency and Remedial Response in accordance with O.A.C. Rule 3745-54-53? [Condition B.18.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

EMERGENCY COORDINATOR

7. In accordance with O.A.C. Rule 3745-54-55 and Condition B.19. of the permit, is an emergency coordinator on premises or on call at all times?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
8. In accordance with O.A.C. Rule 3745-54-55 and Condition B.19. of the		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

permit, is/are the emergency coordinator(s) at the facility familiar with the following:

(a) Contingency plan?

Yes ☒ No ☐ N/A ☐

(b) Facility layout?

Yes ☒ No ☐ N/A ☐

(c) Waste characterization and locations?

Yes ☒ No ☐ N/A ☐

(d) Locations of all records in the facility?

Yes ☒ No ☐ N/A ☐

9. In accordance with O.A.C. Rule 3745-54-55, does/do the emergency coordinator(s) have the authority to commit the resources needed to carry out the contingency plan? [Condition B.19.]

Yes ☒ No ☐ N/A ☐

CONTENT OF CONTINGENCY PLAN

10. Does the Permittee have a contingency plan for the facility which contains the following elements as required by Condition B.15. and O.A.C. Rule 3745-54-52:

(a) Describes the actions facility personnel shall take to comply with O.A.C. Rules 3745-54-51 through 3745-54-56 in response to fires, explosions or any unplanned sudden or nonsudden release of hazardous waste or hazardous waste constituents to air, soil or surface water?

Yes ☒ No ☐ N/A ☐

(b) Describes arrangements agreed to by local police, fire departments, hospitals, contractors and Ohio EPA and the local emergency response team?

Yes ☒ No ☐ N/A ☐

(c) Includes an up-to-date list of names, addresses and phone numbers (office and home) of all persons qualified to act as emergency coordinator in the order that they will assume responsibility for coordination of emergency response?

Yes ☒ No ☐ N/A ☐

(d) Includes a list of all emergency equipment, including fire extinguishing systems, spill control equipment, communications and alarm systems and decontamination equipment?

Yes ☒ No ☐ N/A ☐

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

AMENDMENT OF PLAN

11. Is the Permittee reviewing the approved contingency plan regularly and amending the plan immediately if needed in compliance with O.A.C. Rule 3745-54-54? [Condition B.17.]

Yes ☒ No ☐ N/A ☐

NOTE: Also see Question #4 of Recordkeeping requirements to verify that any changes to the contingency plan were submitted in accordance with O.A.C. Rule 3745-50-51.

IMPLEMENTATION OF PLAN

12. Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents at the facility since date of last inspection as described by Condition B.14. of the permit? If so,

Yes ☐ No ☒ N/A ☐

13. Did the Permittee immediately implement the approved contingency plan and follow the emergency procedures described in O.A.C. Rule 3745-54-56? [Condition B.14.]

Yes ☐ No ☐ N/A ☒

14. Has the Permittee had any of the following situations since date of last inspection:

(a) fire involving hazardous waste?

Yes ☐ No ☒ N/A ☐

(b) explosion involving hazardous waste?

Yes ☐ No ☒ N/A ☐

(c) any uncontrolled hazardous waste reaction that produces or has the potential to produce hazardous conditions, including noxious, poisonous, flammable and /or explosive gases, fumes, or vapors; harmful dust; or explosive conditions?

Yes ☐ No ☒ N/A ☐

(d) any fire or explosion that has an increased potential to threaten human health or the environment due to its proximity to a hazardous waste management unit?

Yes ☐ No ☒ N/A ☐

(e) any hazardous waste released, outside of a secondary containment system, that causes or has the potential to cause off-site soil and/or surface water contamination?

Yes ☐ No ☒ N/A ☐

(f) any hazardous waste release that produces or has a potential to produce hazardous conditions, including noxious, poisonous, flammable and/or explosive gases, fumes, or vapors; harmful dust; or explosive conditions?

Yes ☐ No ☒ N/A ☐

(g) When No_x emissions from any where within the facility are visually observed by site personnel leaving the facility property.

Yes ☐ No ☒ N/A ☐

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- | | Y/N/NA | RMK# |
|---|--|------|
| 15. If yes, to any situation in number 3 above was the Contingency Plan implemented? | Yes___No <input type="checkbox"/> N/A_x___ | |
| 16. Did the Permittee collect and manage released material, emergency response material and by-products [unless making a demonstration that such waste is not hazardous in accordance with O.A.C. Rules 3745-51-03(C) and (D)]? [Condition B.16.] | Yes___No <input type="checkbox"/> N/A_x___ | _ |
| (a) Within (15) days of the incident did the Permittee submit, to the Director, a written report of the incident? If so, | Yes___No <input type="checkbox"/> N/A_x___ | _ |
| (i) Did the report contain the elements set forth in O.A.C. Rule 3745-54-56(J)? [Condition B.23.] | Yes___No <input type="checkbox"/> N/A_x___ | |
| (b) Did the Permittee note in the operating record the time, date and details of any incident that required the implementation of the approved contingency plan? [Condition B.23.] | Yes___No <input type="checkbox"/> N/A_x___ | _ |

ADDITIONAL REQUIREMENTS

- | | | |
|---|--|---|
| 17. Is the Permittee following the Surface Water Management Plan as outlined in Section F of the approved application? [Condition B.41.] | Yes_x___No <input type="checkbox"/> N/A___ | _ |
| 18. Has the Permittee accepted and unloaded any loads that have created a public nuisance pursuant to Ohio Revised Code 3734.02(I)? [Condition B.44.] | Yes <input type="checkbox"/> No_x___N/A___ | _ |

CLOSURE REQUIREMENTS

GENERAL CLOSURE REQUIREMENTS

- | | | |
|---|--|---|
| 1. Is the Permittee maintaining at the facility, the approved closure plan which contains the elements set forth in O.A.C. Rule 3745-55-12? [Condition B.29.] | Yes_x___No <input type="checkbox"/> N/A___ | _ |
|---|--|---|

AMENDMENT OF CLOSURE PLAN

- | | | |
|--|--|---|
| 2. Has the Permittee amended the closure plan? | Yes___No_x___N/A___ | _ |
| (a) If so, has the plan been amended in accordance with O.A.C. Rule 3745-55-12(C)? [Condition B.28.] | Yes___No <input type="checkbox"/> N/A_x___ | _ |

NOTE: Also see Recordkeeping Requirements (Question #4) in order to verify that any changes to the closure plan were submitted in accordance with O.A.C. Rule 3745-50-51.

- | | | |
|--|--|---|
| (b) If so, has the Permittee revised the closure cost estimate? [Condition B.36.(c)] | Yes___No <input type="checkbox"/> N/A_x___ | _ |
| (c) If so, has the Permittee submitted to Ohio EPA the latest cost | Yes___No <input type="checkbox"/> N/A_x___ | _ |

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

estimate? [Condition B.36.(d)]

CLOSURE PROCEDURES

3. Has the Permittee closed the facility? If so,

Yes___No_x___N/A___

(a) Was closure conducted in accordance with the closure performance standard of O.A.C. Rule 3745-55-11 and the approved closure plan as set forth in the permit application? [Conditions B.26., B.27.]

Yes___No ☐ N/A_x___

(b) *Within 120 prior to closure:* Did the Permittee submit to Ohio EPA, NWDO a sampling and analysis plan (SAP) for obtaining background sample data? [Condition B.30.(b)]

Yes___No ☐ N/A_x___

(c) After receiving the final volume of hazardous waste, did the Permittee remove from the facility all hazardous waste and complete closure activities in accordance with the schedule specified in the approved closure plan and as required by O.A.C. Rule 3745-55-13? [Condition B.31.]

Yes___No ☐ N/A_x___

(d) Has the Permittee decontaminated and/or disposed of all facility equipment, structures and soils as required by O.A.C. Rule 3745-55-14 and the approved closure plan? [Condition B.32.(a)]

Yes___No ☐ N/A_x___

(e) Did the Permittee notify Northwest District Office, OEPA within five (5) working days prior to all rinseate and soil sampling? [Condition B.32.(b)]

Yes___No ☐ N/A_x___

(f) Has the Permittee certified that the facility has been closed in accordance with the specifications in the approved closure plan as required by O.A.C. Rule 3745-55-15? [Condition B.33.]

Yes ☐ No___N/A_x___

REQUIREMENTS FOR IGNITABLE, REACTIVE OR INCOMPATIBLE WASTES

4. Is the Permittee in compliance with the requirements of O.A.C. Rule 3745-54-17 (for ignitable, reactive and incompatible wastes), the approved application and conditions of the permit? [Condition B.8.(a)]

Yes_x___No ☐ N/A___

5. Does the Permittee provide electrical grounding for all containers and tanks during the handling of ignitable, reactive and incompatible wastes? [Condition B.8.(e)]

Yes_x___No ☐ N/A___

6. Does the Permittee provide and require the use of spark proof tools during all operations involving the handling of flammable and combustible wastes? [Condition B.8.(b)]

Yes_x___No ☐ N/A___

7. Does the Permittee prohibit smoking and open flames in areas where

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
hazardous wastes are managed and post appropriate signs? [Condition B.8.(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
8. Where applicable, does all wiring and electrical equipment at the container storage building meet the National Fire Protection Association, "National Electric Code" National Fire Codes, 1985 Edition, Vol. 3, Chapter 5, Special Occupancies, Articles 500-503, pp. 176 through 189.)? [Condition B.8.(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

TANK SYSTEM REQUIREMENTS

A description of the Permittee's tank system operations including the Integrated Aqueous Waste Treatment System (IAWTS), truck unloading operation, waste storage/treatment system, filtration operations, pump houses and yard piping is included in Module D of the permit.

GENERAL REQUIREMENTS

1. Is the Permittee limiting the total volume of waste managed in the tank systems to the maximum volume for each tank as authorized by Condition D.1.?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
2. Does the Permittee store and treat in tanks only those hazardous wastes as specified in the approved Part B permit application and Condition D.1. of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
3. Does the Permittee have on-file a written statement by a qualified, independent, registered professional engineer stating the new tanks are suitable for handling hazardous wastes? [Condition D.2.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

CONTAINMENT/DETECTION REQUIREMENTS

4. Is the secondary containment system for each tank system designed, installed and operated in accordance with O.A.C. rule 3745-55-93 and the terms and conditions of the permit? [Condition D.3.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
---	--	-------

GENERAL OPERATING REQUIREMENTS

5. Does the Permittee prevent the placement of hazardous waste in the tank if such placement could cause the unit to leak or fail? [Condition D.4.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
6. Does the Permittee use appropriate controls and practices to prevent spills or overflows from the tank in accordance with Condition D.4.(b) of the permit?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

RESPONSE TO LEAKS AND SPILLS

7. Has a leak or spill occurred from the tank system or has the system become unfit for continued use? If so, [Condition D.6.]	Yes No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) Did the Permittee follow the emergency procedures as required		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

by O.A.C. Rule 3745-55-96 and O.A.C Rule 3745-93(C)(4)?

Yes ___ No ☐ N/A ☒ ___

(i) Did the Permittee stop the flow of hazardous waste into the tank system or secondary containment system and inspect the system to determine the cause of the release? [Condition D.6.(a)(i)]

Yes ___ No ☐ N/A ☒ ___

(ii) Did the Permittee remove waste and accumulated precipitation from the system within 24 hours of the detection of the leak or at an earlier practicable time to prevent further release and to allow inspection and repair of the tank/containment system to be performed? [Condition D.6.(a)(ii)]

Yes ___ No ☐ N/A ☒ ___

(iii) Did the Permittee contain visible releases to the environment and immediately conduct a visual inspection of all releases to the environment and base that inspection on: (1) preventing further migration of the leak or spill to soils or surface water and (2) remove and properly dispose of any visible contamination of the soil or surface water? [Condition D.6.(a)(iii)]

Yes ___ No ☐ N/A ☒ ___

(b) Did the Permittee report the leak/spill to the Director in accordance with the procedures as outlined in Condition D.7. of the permit?

Yes ___ No ☐ N/A ☒ ___

8. Has there been a leak or spill from a tank system, from a secondary containment system or a system become unfit for continual use? [Condition D.6.(b)]

Yes ___ No ☒ N/A ___

(a) Has there been a release caused by a spill that has not damaged the integrity of the system? [Condition D.6.(b)(i)]

Yes ___ No ☒ N/A ___

(i) If so, has the Permittee removed the waste and made any necessary repairs before returning the tank system to service? [Condition D.6.(b)(i)]

Yes ___ No ☐ N/A ☒ ___

(b) Has there been a release caused by a leak from the primary tank system to the secondary containment system? [Condition D.6.(b)(ii)]

Yes ___ No ☒ N/A ___

(i) If so, has the Permittee repaired the primary system prior to returning it to service? [Condition D.6.(b)(ii)]

Yes ___ No ☐ N/A ☒ ___

(c) Has there been a release to the environment caused by a leak from a component of the tank system that is below ground and does not have secondary containment? [Condition D.6.(b)(iii)]

Yes ☐ No ☒ N/A ___

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(i) If so, has the Permittee provided this component with secondary containment before the component was returned to service? [Condition D.6.(b)(iii)]	Yes___No <input type="checkbox"/> N/A_x___	_____
(d) Has there been a release to the environment caused by a leak from aboveground portion of the tank system that does not have secondary containment and can be visually inspected? [Condition D.6.(b)(iv)]	Yes No_x_ N/A___	_____
(i) If so, has the Permittee repaired the tank system before returning it to service? [Condition D.6.(b)(iv)]	Yes___No <input type="checkbox"/> N/A_x___	_____
(e) Has there been a release to the environment caused by a leak from a portion of the tank system that is not readily available for visual inspection? [Condition D.6.(b)(v)]	Yes <input type="checkbox"/> No_x_ N/A___	_____
(i) If so, has the Permittee provided secondary containment that meets the requirements of OAC Rule 3745-55-93 before returning the component to service? [Condition D.6. (b)(v)]	Yes___No <input type="checkbox"/> N/A_x___	_____
(f) Has the Permittee replaced a component of the tank system to eliminate a leak?	Yes___No_x_ N/A___	_____
(i) If so, does that component satisfy the requirements for a new tank system? [Condition D.6.(b)(vi)]	Yes___No <input type="checkbox"/> N/A_x_	_____
9. Has there been any major repairs to eliminate leaks or restore the integrity of the tank system?	Yes___No_x_ N/A___	_____
(i) If so, has the Permittee obtained a certification by an independent, qualified, registered professional engineer? [Condition D.6.(c)]	Yes___No <input type="checkbox"/> N/A_x___	_____

RECORDKEEPING AND REPORTING

10. Has the Permittee reported to the Director within 24 hours of a leak or spill from the tank system or secondary containment system to the environment? [Condition D.7.(a)]	Yes___No <input type="checkbox"/> N/A_x___	_____
11. Has the Permittee reported the following within thirty days of detecting a release to the environment from a tank or secondary containment system to the environment? [Condition D.7.(b)]		
(i) Likely route of migration of the release?	Yes___No <input type="checkbox"/> N/A_x___	_____
(ii) Characteristics of the surrounding soil?	Yes___No <input type="checkbox"/> N/A_x___	_____
(iii) Results of any monitoring or sampling conducted	Yes___No <input type="checkbox"/> N/A_x___	_____
?		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- | | Y/N/NA | RMK# |
|---|---|------|
| (iv) Proximity of downgradient drinking water, surface water, and populated areas? | Yes___No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | ___ |
| (v) Description of response actions taken or planned? | Yes___No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | ___ |
| 12. Has the Permittee submitted to the Director all certifications of major repair within seven days after returning the system to use? [Condition D.7.(c)] | Yes___No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | ___ |
| 13. Does the Permittee obtain and keep on file the written statement by those persons required to certify the design and installation of the tank system? [Condition D.7.(d)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |

INSPECTIONS

- | | | |
|--|---|-----|
| 14. Is the Permittee inspecting the tank system in accordance with the approved inspection plan, Condition D.5. of the permit, and the following requirements of O.A.C. Rule 3745-55-95: [Condition D.5.] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |
| (a) Inspection of overfill controls in accordance with the procedures and schedule in the Part B permit application? [Condition D.5.(b)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |
| (b) Daily inspection of the above ground portion of the tank system to detect corrosion or release? [Condition D.5.(c)(i)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |
| (c) Daily inspection of construction materials and area immediately surrounding the tank to detect erosion or signs of release? [Condition D.5.(c)(iii)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |
| (d) Reviewing data gathered from monitoring and leak detection equipment (e.g. pressure/temperature gauges) to ensure that the tank system(s) are being operated according to design specifications? [Condition D.5.(c)(ii)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |
| 15. Is the Permittee maintaining documentation of the tank system inspections in the operating log of the facility as required by O.A.C. Rule 3745-55-95(D)? [Condition D.5.(d)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |

TANK SYSTEM/SPECIAL REQUIREMENTS

- | | | |
|---|---|-----|
| 16. Prior to placement of hazardous waste in tanks that previously held an incompatible waste and/or material: Does the Permittee ensure that the tank system is decontaminated prior to placement of waste in the unit and that any additional procedures as outlined in the permit application are followed? [Conditions D.10.(a) and D.9.(b)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A ___ | ___ |
| 17. Prior to the placement of ignitable or reactive waste in a tank system: Does the Permittee ensure that the procedures as specified in the | | |

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
approved permit application are followed? [Condition D.9.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
18. Does the Permittee document compliance with the requirements specified in Questions 16 and 17 as noted above in the facility's operating record? [Conditions D.10.(b), D.9.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

NOTE: The Permittee is also responsible for maintaining protective distances between waste management areas and public ways as required by Tables 2-1 through 2-6 of the National Fire Protection Association's "Flammable and Combustible Liquids Code" (1977 or 1981) incorporated by reference in O.A.C. Rule 3745-50-11. [Condition D.9.(b)]

CLOSURE AND POST-CLOSURE

19. At closure of the tank system, did the Permittee follow the procedures set forth in the approved closure plan? [Condition D.8.(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
20. During closure, if the Permittee could not demonstrate that all contaminated soils could be removed: Did the Permittee close the unit and perform post-closure care following a plan approved by the Ohio EPA? [Condition D.8.(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____

CORRECTIVE ACTION

RCRA FACILITY INVESTIGATION

1. Has the Permittee discovered any new waste management units? [Condition E.5.]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) If so, has a RFI Workplan been submitted? [Condition E.5.]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(i) If so, has Ohio EPA provided written comments?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(ii) If so, has the Permittee within forty-five days submitted an amended or new RFI Workplan?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
2. Has the Permittee implemented the RFI Workplan according to the terms and schedule in the approved RFI Workplan? [Condition E.5.(b)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
3. Has the RFI been completed?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
(a) If so, was the final report submitted to Ohio EPA within sixty		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
days? [Condition E.5.(c)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(i) If so, does the final report describe the procedures, methods, and results of the RFI? [Condition E.5.]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(b) If so, has Ohio EPA provided written comments on the RFI? [P.C. E.5.]	Yes___ No___ N/A_x___	_____
(i) If so, did the Permittee submit either an amend or new RFI Report? [Condition E.5.]	Yes___ No___ N/A_x___	_____
(c) If so, has Ohio EPA approved or modified and approved the amended or new RFI Report? [Condition E.5.]	Yes___ No___ N/A_x___	_____
4. Has Ohio EPA required the Permittee to develop and implement an interim measures workplan? [Condition E.6.]	Yes___ No_x___ N/A___	_____

DETERMINATION OF NO FURTHER ACTION

5. Has the Permittee submitted a Class 3 permit modification to terminate the Corrective Action task of the Schedule of Compliance? [Condition E.7.]	Yes___ No_x___ N/A___	_____
(a) If so, has Ohio EPA approved the Class 3 permit modification?	Yes___ No___ N/A_x___	_____

CORRECTIVE MEASURES STUDY

6. Has Ohio EPA notified the Permittee that a CMS must be conducted? [Condition E.8.]	Yes___ No_x___ N/A___	_____
(a) If so, has a CMS Workplan been submitted within ninety days? [Condition E.8.(a)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(i) If so, did Ohio EPA comment on the CMS Workplan?	Yes___ No___ N/A_x___	_____
(b) If so, did the Permittee submit an amended or new CMS Workplan within forty-five days?	Yes___ No <input type="checkbox"/> N/A_x___	_____
(c) Has Ohio EPA approved or modified and approved the amended or new CMS Workplan?	Yes___ No___ N/A_x___	_____
7. Has the Permittee implemented the CMS Workplan? [Condition E.8.(b)]	Yes___ No___ N/A_x___	_____
8. Has the CMS been completed?	Yes___ No___ N/A_x___	_____
(a) If so, was the final report submitted to Ohio EPA within sixty days? [Condition E.8.(c)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(i) If so, did Ohio EPA provide written comments on the		

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
CMS Report to the Permittee?	Yes___ No___ N/A_x___	_____
(b) If so, did the Permittee submit either a amended or new CMS Report that incorporates Ohio EPA's comments with in forty-five days? [Condition E.8.(c)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(c) Has Ohio EPA approved or modified and approved the amended or new CMS Report? [Condition E.8.(c)]	Yes___ No___ N/A_x___	_____
9. Has Ohio EPA initiated a permit modification to require implementation of the corrective measures? [Condition E.9.(i)]	Yes___ No_x___ N/A___	_____
10. Has the Permittee provided financial assurance in the amount necessary to implement the corrective measures? [Condition E.9.(ii)]	Yes___ No <input type="checkbox"/> N/A_x___	_____

NEWLY IDENTIFIED WMUs OR RELEASES

11. Has a new WMU been identified at the facility?	Yes___ No_x___ N/A___	_____
(a) If so, has the Permittee submitted the following to the Ohio EPA		
(i) The location of the unit on the site topographic map? [Condition E.10.(a)(i)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(ii) Designation of the type of unit? [Condition E.10.(a)(ii)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(iii) General dimensions and structural description? [Condition E.10.(a)(iii)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(iv) Dates when the unit was operated? [Condition E.10.(a)(iv)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
(v) Specifications of all waste that have been managed at the unit? [Condition E.10.(a)(v)]	Yes___ No <input type="checkbox"/> N/A_x___	_____
12. Has the Permittee submitted to Ohio EPA within thirty days all available information pertaining to any release of hazardous waste or hazardous constituents? [Condition E.10.(b)]	Yes_x___ No <input type="checkbox"/> N/A___	_____

MISCELLANEOUS TREATMENT REQUIREMENTS

Filtration units at the facility have been categorized as miscellaneous units. The filtration system consists of Basket Strainers, Bag Filters, Filter Press, Primary and Secondary Cartridge Filters, and By-Pass Cartridge Filters. These individual units may either be used in series or parallel. The Thief Pole Rinsing System has also been categorized as a miscellaneous unit. [Permit Module F.]

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

GENERAL REQUIREMENTS

1. Does the Permittee ensure that no more than 126,000,000 gallons of waste is processed per year through the treatment system? [Condition F.1.]
Yes ☒ No ☐ N/A ☐ _____
2. Does the Permittee ensure that no more than 650,000 gallons of waste is processed per day through the treatment system? [Condition F.1.]
Yes ☒ No ☐ N/A ☐ _____
3. Has a leak or spill occurred from the miscellaneous unit or has the unit become unfit for continued use? If so,
Yes ☐ No ☒ N/A ☐ _____
 - (a) Did the Permittee follow the emergency procedures as required by O.A.C. Rule 3745-55-96 and O.A.C Rule 3745-93(C)(4)?
Yes ☐ No ☐ N/A ☒ _____
 - (i) Did the Permittee stop the flow of hazardous waste into the miscellaneous unit or secondary containment system and inspect the system to determine the cause of the release? [Condition F.6.(a)(i)]
Yes ☐ No ☐ N/A ☒ _____
 - (ii) Did the Permittee remove waste and accumulated precipitation from the system within 24 hours of the detection of the leak or at an earlier practicable time to prevent further release and to allow inspection and repair of the miscellaneous unit or containment system to be performed? [Condition F.6.(a)(ii)]
Yes ☐ No ☐ N/A ☒ _____
 - (iii) Did the Permittee contain visible releases to the environment and immediately conduct a visual inspection of all releases to the environment and base that inspection on: (1) preventing further migration of the leak or spill to soils or surface water and (2) remove and properly dispose of any visible contamination of the soil or surface water? [Condition F.6.(a)(iii)]
Yes ☐ No ☐ N/A ☒ _____
 - (b) Did the Permittee report the leak/spill to the Director in accordance with the procedures as outlined in Condition F.7. of the permit?
Yes ☐ No ☐ N/A ☒ _____

CONTAINMENT/DETECTION REQUIREMENTS

4. Is the secondary containment system of each unit designed, installed and operated to prevent any migration of waste or accumulated liquid out of the system to soil, groundwater or surface water? [Condition F.3.(a)]
Yes ☒ No ☐ N/A ☐ _____
5. Is the secondary containment system of each unit capable of detection and collecting releases and accumulated liquids until the collected material is removed? [Condition F.3.(b)]
Yes ☒ No ☐ N/A ☐ _____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

Y/N/NA

RMK#

GENERAL OPERATING REQUIREMENTS

6. Does the Permittee prevent the placement of hazardous waste in the filter system if they could cause the filter, ancillary equipment, or containment system to rupture, leak, corrode or other wise fail? [Condition F.4.(a)] Yes ☒ No ☐ N/A ☐ _____
7. Does the Permittee use appropriate controls and practices to prevent spills or overflows from filters or containment systems in accordance with Condition F.4.(b) of the permit? Yes ☒ No ☐ N/A ☐ _____
8. Does the Permittee operate all miscellaneous units in accordance with manufacture instructions and accepted industry practice? [Condition F.4.(c)] Yes ☒ No ☐ N/A ☐ _____

INSPECTIONS

9. Is the Permittee inspecting the Miscellaneous Units in accordance with the Inspection Schedule? [Condition F.5.(a)] Yes ☒ No ☐ N/A ☐ _____
10. Is the Permittee inspecting the following:
- (a) Inspection of overfill controls? [Condition F.5.(b)] Yes ☒ No ☐ N/A ☐ _____
- (b) Aboveground portions of the miscellaneous units for corrosion or releases of waste? [Condition F.5.(c)(i)] Yes ☒ No ☐ N/A ☐ _____
- (c) Is data gathered from monitoring and leak detection equipment to ensure that miscellaneous units are being operated according to design? [Condition F.5.(c)(ii)] Yes ☒ No ☐ N/A ☐ _____
- (d) Is the construction materials and the area immediately surrounding the externally accessible portion of the unit inspected? [Condition F.5.(c)(iii)] Yes ☒ No ☐ N/A ☐ _____

MISCELLANEOUS UNIT SPECIAL REQUIREMENTS

11. **Prior to placement of hazardous waste in a miscellaneous units that previously held an incompatible waste and/or material:** Does the Permittee ensure that the miscellaneous unit is decontaminated prior to placement of waste in the unit and that any additional procedures as outlined in the permit application are followed? [Conditions F.9.(b)] Yes ☒ No ☐ N/A ☐ _____
12. **Prior to the placement of ignitable or reactive waste in a miscellaneous units:** Does the Permittee ensure that the procedures as specified in the approved permit application are followed? [Condition F.9.(a)] Yes ☒ No ☐ N/A ☐ _____

CLOSURE AND POST-CLOSURE

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- | | Y/N/NA | RMK# |
|--|--|-------|
| 13. At closure of the miscellaneous unit, did the Permittee follow the procedures set forth in the approved closure plan? [Condition F.10.(a)] | Yes__ No <input type="checkbox"/> N/A__x__ | _____ |
| 14. During closure, if the Permittee could not demonstrate that all contaminated soils could be removed: Did the Permittee close the miscellaneous unit and perform post-closure care following a plan approved by the Ohio EPA? [Condition F.10.(b)] | Yes__ No <input type="checkbox"/> N/A__x__ | _____ |

GROUND WATER DETECTION MONITORING

- | | | |
|---|--|-------|
| 1. Is the Permittee maintaining a ground water monitoring system as specified in Permit Condition J.2.? | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 2. Is the Permittee monitoring upgradient background wells and downgradient wells for the parameters and constituents listed in Permit Condition J.3.? [Condition J.3.] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 3. Is the Permittee following Permit Condition J.4. when obtaining and analyzing samples from ground water monitoring wells and the capillary drain sampling point? [Condition J.4. and J.7.(a)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 4. Has the Permittee determined the elevation of the ground water at each well each time the ground water has been sampled? [Condition J.5.(a)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 5. Has the Permittee recorded the total depth of any newly installed wells? Condition J.5.(b)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 6. Has the Permittee conducted a statistical evaluation for: | | |
| (a) The eight bedrock monitoring wells? [Condition J.6.] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| (b) the capillary drain using trend analysis? [Condition J.6.] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 7. Is the Permittee determining the ground water quality at each well and the capillary drain, semi-annually during post-closure period of the Closure Cell? [Condition J.7.(b)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 8. Is the Permittee determining the ground water flow rate and direction on the uppermost aquifer at least annually? [Condition J.7.(c)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 9. Has the Permittee determined if there is a statistically significant increase over the background values for each parameter identified in Permit Condition J.3.(a) each time ground water quality is determined at the compliance point? [Condition J.7.(d)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 10. Has the Permittee performed the evaluation described in Permit Condition J.7. within sixty days after completion of sampling? [Condition J.7.(e)] | Yes__x__ No <input type="checkbox"/> N/A__ | _____ |
| 11. Has the Permittee entered all the information obtained on Permit | | |

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
Condition J.7. in the Operation Record? [Condition J.8.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
12. Does the Permittee maintain a copy of the QA/QC report containing at a minimum the information required in Permit Condition J.8.(b)? [Condition J.8.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
13. Has the Permittee submitted the ground water annual report to the Ohio EPA by March 1 st ? [Condition J.8.(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
14. Has the Permittee submitted the analytical results required by Permit Conditions J.7.(b), J.7.(c) and J.7.(d) by July 1 st and January 1 st of each year? [Condition J.8.(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
15. Is the Permittee in compliance with O.A.C Rule 3745-54-95? [P.C. J.9.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____

SPECIAL REQUIREMENTS

16. Has the Permittee determined, pursuant to Permit Condition J.6., that there is statistically significant evidence of contamination by any constituent listed in Permit Condition J.3.? [Condition J.10.]

Yes ☐ No ☒ N/A ☐ _____

If so,

(a) Has the Permittee notified Ohio EPA in writing within seven days of the determination? [Condition J.10.(a)]

Yes ☐ No ☐ N/A ☒ _____

(b) Did the Permittee immediately sample ground water in all wells and determine the concentration of all constituents identified in the Appendix to OAC Rule 3745-54-98? [Condition J.10.(b)]

Yes ☐ No ☐ N/A ☒ _____

(c) Has the Permittee re-sampled affected wells within one month and repeated the analysis for any compound identified in the Appendix to OAC 3745-54-98 that were detected? [Condition J.10.(c)]

Yes ☐ No ☐ N/A ☒ _____

If so;

(i) If the second analysis confirmed the initial results were the detected compounds used to form the basis for compliance monitoring?

Yes ☐ No ☐ N/A ☒ _____

(ii) If the Permittee elected not to re-sample were the detected compounds used to form the basis for compliance monitoring?

Yes ☐ No ☐ N/A ☒ _____

(d) Did the Permittee submit a permit modification to Ohio EPA, within ninety days, to establish a compliance monitoring program in accordance with OAC 3745-54-99? [Condition J.10.(d)]

Yes ☐ No ☐ N/A ☒ _____

If so; did the application include:

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
(i) The identification of the concentration of each Appendix to OAC 3745-54-98 constituent found in the ground water at each well at the compliance point? [Condition J.10.(d)(i)]	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(ii) Any proposed changes to the ground water monitoring system at the facility necessary to meet the requirements of compliance monitoring? [Condition J.10.(d)(ii)]	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(iii) Any proposed changes to the monitoring frequency, sampling and analysis procedures or methods or statistical procedures used at the facility necessary to meet the requirements of compliance monitoring and the Ground Water Protection Standard? [Condition J.10.(d)(iii)]	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(iv) The compliance point, a proposed concentration limit under OAC 3745-54-94(A)(1) or (A)(2), or a notice of intent to seek an alternate concentration limit for a hazardous constituent? [Condition J.10.(d)(iv)]	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(v) Has the permittee begun sampling and analyzing for the new constituent at the next regularly scheduled sampling event following the event in which they were determined to be present? [Condition J.10.(d)(v)]	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(e) Has the Permittee submitted to the Director a corrective action feasibility plan or all data necessary to satisfactorily justify an alternate concentration limit within 180 days of determining a statistically significant increase? [Condition J.10.(e)]	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
(f) Has the Permittee determined, pursuant to Permit Condition J.7., there is a statistically significant increase above the background values for the parameters specified in Permit Condition J.3.(a)? [Condition J.10.(f)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A_____	_____
If so, the Permittee may demonstrate that a source other than a regulated unit caused the increase or that the increase resulted from error in sampling, analysis or evaluation. In such cases, did the Permittee:		
(i) Notify the Director in writing within seven days of determining a statistically significant increase that he intended to make a demonstration? [Condition J.10.(f)(i)]	Yes___ No___ N/A <input checked="" type="checkbox"/>	_____
(ii) Within 90 days of determining a statistically significant increase, submit a report to the Director which successfully demonstrated that a source other than a	Yes___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- | | Y/N/NA | RMK# |
|---|---|-------|
| regulated unit caused the increase, or that the increase resulted from error in sampling, analysis, or evaluation? [Condition J.10.(f)(ii)] | Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ___ | _____ |
| (iii) Within 90 days of determining a statistically significant increase, submitted to the Director an application for a permit modification to make appropriate changes to the detection monitoring program at the facility? [Condition J.10.(f)(iii)] | Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ___ | _____ |
| (iv) Has the Permittee continued to monitor in accordance with the detection monitoring program at the facility? [Condition J.10.(f)(iv)] | Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ___ | _____ |
| 17. Has the Permittee or Ohio EPA determined that the detection monitoring program no longer satisfies the requirements of the regulations? [Condition J.11.] | Yes ___ No <input checked="" type="checkbox"/> N/A _____ | _____ |
| If so; | | |
| (a) Within 90 days of the determination, submit an application for a permit modification to make any appropriate changes to the program? [Condition J.11.] | Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ___ | _____ |

POST-CLOSURE CARE

POST-CLOSURE CARE

The Permittee is currently required to perform post-closure care for the Closure Cell. The Closure Cell was constructed in the vicinity of where Ponds 4, 5 and 7 had existed. Upon cell construction, materials removed from Ponds 4, 5 and 7 were transferred to the Closure Cell. Materials from Ponds 11 and 12 were stabilized in place before transferring to the Closure Cell.

GENERAL POST-CLOSURE REQUIREMENTS

- | | | |
|---|---|-------|
| 1. Is the Permittee maintaining the secondary leachate collection system as described in Section E of the approved permit application? [Condition M.8.] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____ | _____ |
| 2. During the period of post-closure care, is the Permittee maintaining a groundwater monitoring system in accordance with OAC rule 3745-54-90 through 3745-54-99? [Conditions M.3. (c)(iii)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____ | _____ |
| 3. Is the Permittee maintaining the integrity and effectiveness of the final cover, including making any necessary repairs to the cap? [Condition M.3.(c)(i)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A _____ | _____ |
| 4. <i>While leachate is still being detected:</i> Is the Permittee continuing | | |

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
operation of its leachate collection and removal system? [Condition M.3.(c)(ii)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
5. Does the Permittee prevent run-on and run-off from eroding or otherwise damaging the final cover? [Condition M.3.(c)(iv)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
6. Does the Permittee protect and maintain surveyed benchmarks? [Condition M.3.(c)(v)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
7. Is the Permittee complying with the security requirements for the unit(s) in post-closure as specified in the permit application? [Condition M.3.(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
8. Is the Permittee preventing any use of the unit(s) in post-closure care in a manner which would contribute to damage to the final cover, liner or any other system components? [Condition M.3.(e)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
9. Is the Permittee conducting post-closure care activities in accordance with the post-closure plan and O.A.C. Rules 3745-55-17(D) and 3745-55-18(B)? [Condition M.3.(f)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
10. Is the Permittee conducting post-closure care for each hazardous waste management unit in Permit Condition M.2.? [Condition M.3.(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
11. Is the Permittee maintaining and monitoring the ground water monitoring system and complying with all applicable requirements of OAC Rule 3745-54-90 thru 99 and OAC Rule 3745-55-01 & 02 during the post-closure period ? [Condition M.3.(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	_____
12. Does the Permittee, owner or operator wish to remove hazardous wastes and hazardous waste residues, the liner or contaminated soil?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	_____
If so;		
a.) Has the Permittee, owner or operator demonstrated that the removal of hazardous waste satisfies the criteria of OAC Rule 3745-55-17(C)? [Condition M.5.(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____
b.) Has the Permittee, owner or operator requested a modification to the post-closure permit in accordance with the applicable requirements in OAC Rule 3745-50? [Condition M.5.(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	_____

INSPECTIONS

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

	Y/N/NA	RMK#
13. Is the Permittee inspecting the components, structure and equipment at the site in accordance with the Inspection Schedule in the Part B application ? [Condition M.4.]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	

NOTICES AND CERTIFICATION

- | | | |
|---|--|--|
| 14. Has any post-closure care periods for any hazardous waste disposal units been completed? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| If so; | | |
| a.) Has the Permittee submitted to the Director, within 60 days, a certification that the post-closure care for the hazardous waste disposal unit was performed in accordance with the specifications in the approved Post-Closure Plan ? [Condition M.5.(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| b.) Was the certification signed by the Permittee and an independent, registered professional engineer from the state of Ohio ? [Condition M.5.(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |

FINANCIAL ASSURANCE

- | | | |
|---|--|--|
| 15. Is the Permittee maintaining financial assurance during the post-closure period and complying with all applicable requirements of OAC Rule 3745-55-40 thru 51 ? [Condition M.6.(a)] | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 16. Has the Permittee requested a release of funds? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| If so; | | |
| a.) Has the Permittee demonstrated to the Director that the value of the financial assurance mechanism exceeds the remaining cost of post-closure ? [Condition M.6.(b)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| b.) Has the Permittee submitted itemized bills to the Director when requesting reimbursement ? [Condition M.6.(c)] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |

MODIFICATIONS

- | | | |
|--|--|--|
| 17. Has the Permittee requested a modification of the Post-Closure Plan? | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| If so; | | |
| a.) Has the request been made in accordance with applicable requirements of OAC Rule 3745-50 ? [Condition M.7.] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| b.) Did the request include a copy of the proposed amended Post-Closure Plan for approval by the Director ? [Condition M.7.] | Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- | | Y/N/NA | RMK# |
|---|---|-------|
| c.) Has the Permittee requested a permit modification whenever changes in operating plans or facility design affects the approved Post-Closure Plan, there is a change in the expected year of final closure, or other events occur during the active life of the facility that affect the approved Post-Closure Plan? [Condition M.7.] | Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ___ | _____ |
| d.) Has the Permittee submitted a written request for a permit modification at least 60 days prior to the proposed change in facility design or operation, or no later than 60 days after an unexpected event has occurred which has affected the Post-closure Plan ? [Condition M.7.] | Yes ___ No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> ___ | _____ |

REMARKS

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

LARGE QUANTITY GENERATOR REQUIREMENTS

COMPLETE AND ATTACH A PROCESS DESCRIPTION SUMMARY

CESQG: < 100 Kg. (approximately 25-30 gallons) of waste in a calendar month

SQG: Between 100 and 1,000 Kg. (about 25 to under 300 gallons) of waste in a calendar month

LQG: >1,000 Kg. (~300 gallons) of waste in a calendar month or > 1 Kg. of acutely hazardous waste in a calendar month

NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

PROCESS DESCRIPTION / WASTE ACTIVITIES SUMMARY								
Facility Name: Vickery Environmental, Inc.					Facility Type: TSDFEPA ID#: OHD 020 273 819			
Description of Waste				On-Site Management			Off-Site Management	
Process/Activity Generating Waste (e.g. plating bath, machining, baghouse, painting, etc)	Waste Generated (e.g. sludge, spent solvent, ash, etc)	EPA Waste Code	QTY Generated per Month	Type of Accumulation/ Storage (e.g. container, tank, etc)	Type of On-Site Treatment (recycle, wwt, etc)	Waste Location (Include map if possible)	Name, state, and type of activity occurring at the facility.	
1 Landfill Primary and Secondary Leachate Collection Systems	leachate	F039	7.75 tons	tank (T-Tanks after generation)	filtration	closure cell pre- generation and T- Tanks post- generation	On-Site deep well injection	
2 Filter Cake/ misc debris	sludge	see Part A	115.5 tons	container		container storage building	Clean Harbors Environmental Services, Inc. - London, Ontario, Canada [and] Stablex Canada, Inc. - Blainville, Quebec	
3 Scrubber	waste water	See Part A	13.33 Tons	tank	filtration	scrubber tank	on-site deep well injection	
4 Lab	waste water	See Part A	1.05 Tons	tank	filtration	laboratory tank	on-site deep well injection	

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

5	Truck Wash/ Floor Wash & Pipe Cleanout/ Filter Press Cleaning	waste water	See Part A	129.2 Tons	tank	filtration	V-Tanks	on-site deep well injection
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REMARKS-GENERAL INFORMATION

General Process Information:

Vickery is a hazardous waste treatment, storage and deep well injection disposal facility. Hazardous waste is brought on site by tanker truck. Hazardous waste is sampled and pumped into permitted hazardous waste storage tanks. Hazardous waste is blended in the tanks and transferred via piping to a filter press to remove solids. From the filter press, the liquids are pumped through polishing filters and then deep well injected.

Regulatory/Enforcement History (if applicable): Not Applicable

Other: Not Applicable

POLLUTION PREVENTION

Note to the Inspector: This checklist has been developed to help the division in gathering general information about the pollution prevention (P2) practices that the company may have initiated or attempted to initiate. The checklist is also used to:

- ◇ Facilitate P2 discussions;
- ◇ Identify barriers to P2;
- ◇ Define the P2 universe;
- ◇ Identify the need for future P2 initiatives;
- ◇ Identify partnership opportunities; and
- ◇ Link companies with better P2 resources.

As a prelude to completing this checklist the inspector should use the following list of questions as a way to initiate a dialogue concerning P2:

1. Have you tried to reduce the volume of waste (hazardous and nonhazardous) that you generate? **Yes**
2. What is the largest waste stream that you generate? **Filter Cake**
3. How important would it be to you to eliminate that waste stream? **Very important, but nearly impossible**
4. Does your company understand the reduced regulatory burden and cost saving benefits that eliminating or reducing a waste stream can have?
Yes
5. Could you use better housekeeping practices to reduce the amount of waste that you generate? **No**

If the company responds with one of the answers below, the appropriate box should be checked. If the company's response does not correspond to one of the options below, please record the answer in the space provided in the remarks section.

1. Has the company undertaken any P2 activities to reduce the amount of waste generated? ☒ Yes ☐ No ☐ N/A ☐ RMK#

- a. If so, what has the company done to minimize waste generation?

- ☒ A change in the process resulting in less waste.
☐ A change in the product resulting in less waste.
☐ Use of fewer and less toxic hazardous raw materials.
☐ Better operations/improved housekeeping.
☐ On-site recycling/reuse of hazardous materials.
☐ Sending waste off-site for recycling/reuse.
☐ Other activities (specify):

- b. *If so*, what wastes have been addressed?

- ☒ Solvents
☐ Paint related wastes
☐ Industrial process wastes (sludges, slags, contaminated wastes waters, etc.)
☒ Contaminated oils/hydraulic fluids
☐ Off-spec chemicals
☐ Shop rags
☐ Other (specify):

- ☐ Waste water
☐ Solid waste (paper, plastic, metal, wood, blasting material)
☐ Air emissions
☐ Energy use
☐ Fluorescent light bulbs
☒ Used batteries

- c. If they haven't minimized waste are there barriers that are preventing them from doing it?

- ☐ Lack of information about practical alternatives.
☐ Lack of capital to make process changes.
☐ Lack of internal management support.
☐ The company does not generate enough waste to consider P2.
☐ Other reason given (specify):

2. Does the company plan to do P2 activities in the future? x Yes No N/A RMK#

3. Would the company be interested in receiving additional information from Ohio EPA about P2? Yes x No N/A RMK#

4. Did you give the company information about P2 during the inspection? Yes x No N/A RMK#

5. Would the company like a P2 assessment? Yes x No N/A RMK#

- A. If yes, provide information that makes the company a good candidate for an assessment (i.e., known specific P2 opportunities exist, the company is willing to cooperate and commit resources to the assessment, the company fully understands DHWM's P2 assessment process, etc.)

Vickery continuously evaluates P2 opportunities on its own for economic and environmental benefit.

- B. If no, list the reasons the facility representative gave for not wanting an assessment.

If the company would like a P2 assessment done at their facility, the inspector must give the company representative a copy of the Pollution Prevention Assessments for Hazardous Waste Generators document and discuss it with them (Attachment III of the P2 Assessment Procedures Manual at: <http://www.epa.state.oh.us/dhwm/pdf/P2AssesmentHWGeneraotrs.pdf>).

LARGE QUANTITY GENERATOR REQUIREMENTS

GENERAL REQUIREMENTS

1. Have all wastes generated at the facility been adequately evaluated? [3745-52-11] Yes x No ☐ N/A RMK#
2. Has the generator obtained a U.S. EPA identification number? [3745-52-12] Yes x No ☐ N/A RMK#
3. Were annual reports filed with Ohio EPA on or before March 1st? [3745-52-41] Yes x No ☐ N/A RMK# 1

WASTE IMPORT/EXPORT REQUIREMENTS

4. Does the generator import or export hazardous waste?
If so: Yes x No N/A RMK#
 - a. Has the generator notified U.S. EPA of export/import activity? [3745-52-53] Yes x No ☐ N/A RMK#
 - b. Has the generator complied with special manifest requirements? [3745-52-54] Yes x No ☐ N/A RMK#
 - c. For manifests that have not been returned to the generator: has an exception report been filed? [3745-52-55] Yes No ☐ N/A x RMK#
 - d. Has an annual report been submitted to U.S. EPA? [3745-52-56] Yes x No ☐ N/A RMK# 7
 - e. Are export related documents being maintained on-site? [3745-52-57] Yes x No ☐ N/A RMK#

GENERATOR CLOSURE REQUIREMENTS

5. Has the generator closed any <90-day accumulation unit(s) since the date of the last inspection? If so: Yes ___ No x N/A ___ RMK#

a. Describe the unit(s) which the generator has closed.

**Not
App
lica
ble**

b. Does closure appear to have met the closure performance standard of 3745-66-11? [3745-52-34(A)(1)]

Yes ___ No ☐ N/A x RMK#

c. Please provide a description of the documentation provided by the generator to demonstrate that closure was completed in accordance with the closure performance standards.

Not Applicable

NOTE: *If the generator has closed a <90-day tank, closure must also be completed in accordance with OAC 3745-66-97 (except for paragraph C of this rule). [3745-52-34]*

REMARKS

MANIFEST REQUIREMENTS

You must start this part of the inspection by telling the company representative about the certification statement on the hazardous waste manifest using the following question and statement:

Are you aware of what the statement that you sign on the manifest says? Yes x No

If the answer is no, show them what the statement says using a signed manifest.

NOTE: *While the statement is a certification that a P2 strategy is in place, signing the statement does not establish any legal obligations with which the company must comply. In other words, there is no violation of the hazardous waste rules if they sign the manifest and they don't have a program in place.*

1. Have all hazardous wastes shipped off-site been accompanied by a manifest? (U.S. EPA Form 8700-22) [3745-52-20(A)] Yes x No ☐ N/A ___RMK#
2. Have items (1) through (20) of each manifest been completed? [3745-52-20(A)] Yes X No ☐ N/A ___RMK#

NOTE: *U.S. EPA Form 8700-22(A) (the continuation form) may be needed in addition to Form 8700-22. In these situations items (21) through (35) must also be completed. [3745-52-20(A)]*

3. Does each manifest designate at least one permitted disposal facility? [3745-52-20(B)] Yes x No ☐ N/A ___RMK#

NOTE: *The generator may designate on the manifest one alternate facility to handle the waste in the event of an emergency which prevents the delivery of waste to the primary designated facility. [3745-52-20(C)].*

4. Since the date of the last inspection, has the transporter been unable to deliver a shipment of hazardous waste to the designated facility? If so:
 - a. Did the generator designate an alternate TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)] Yes ___ No ☐ N/A x RMK#

Vickery Environmental, Inc.
OHD 020-273 819
03-72-0191

5. Have the manifests been signed by the generator and initial transporter? [3745-52-23(A)(1)(2)]

Yes ☒ No ☐ N/A ☐
Has the generator received a return copy of each completed manifest within 35 days of being accepted by the transporter? If not:
☐
N/A

Yes ☒ No ☐ N/A ☐ RMK#

RM
K#
_6.

- a. Did the generator contact the transporter and/or TSD facility to check on the status of the waste? [3745-52-42(A)(1)]

Yes ☐ No ☐ N/A ☒ RMK#

- b. If the manifest was not received within 45 days, did the generator file an exception report with Ohio EPA? [3745-52-42(A)(2)]

Yes ☐ No ☐ N/A ☒ RMK#

7. Are signed copies of all manifests and any exception reports being retained for at least three years? [3745-52-40]

Yes ☒ No ☐ N/A ☐ RMK#

NOTE: Waste generated at one location and transported along a publicly accessible road for temporary consolidated storage or treatment on a contiguous property also owned by the same person is not considered "on-site" and manifesting and transporter requirements must be met. To transport "along" a public right-of-way the destination facility has to act as a transfer facility or have a permit because this is considered to be "off-site." For additional information see the definition of "on-site" in OAC rule 3745-50-10.

REMARKS

PERSONNEL TRAINING

1. Does the generator keep records required by 3745-65-16(D) including:
- a. Job titles, as they relate to hazardous waste management, and the name of each employee filling each job? Yes x No ☐ N/A ____RMK#
 - b. Job descriptions, including requisite skill, education, or other qualifications, and duties of facility personnel assigned to each position? Yes x No ☐ N/A ____RMK#
 - c. Type and amount of both introductory and continuing training to be given to each person filling a position? Yes x No ☐ N/A ____RMK#
 - d. Documentation that personnel have completed the training or job experience required under 3745-65-16(A)(B) & (C)? Yes x No ☐ N/A ____RMK#

NOTE: *If the facility's business practices precludes written job titles/descriptions, they should be able to identify, by name, all personnel who are involved with hazardous waste management, and the training/experience that they receive initially and annually. Item 9 on the next page can be used to document that all necessary employees have been trained.*

2. Does the generator have a training program which teaches facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to their positions? [3745-65-16(A)(2)] Yes x No ☐ N/A ____RMK#
3. Does the personnel training program include instruction in the following areas to ensure that facility personnel are able to respond effectively to emergencies by familiarizing them with: [3745-65-16(A)(3)]
- a. Emergency procedures? Yes x No ☐ N/A ____RMK#
 - b. Emergency equipment? Yes x No ☐ N/A ____RMK#

c. Emergency systems?

Yes

☒ No

☐ N/A

N/A

RM

K#

4.

Does emergency training described in 3(a), (b) & (c) above include *where applicable*: [3745-65-16(A)(3)(a-f)

a. Procedures for using, inspecting, repairing and replacing emergency and monitoring equipment?

Yes ☒ No ☐ N/A ☐ RMK#

b. Key parameters for automatic waste feed cut-off systems?

Yes ☒ No ☐ N/A ☐ RMK#

c. Communication or alarm system?

Yes ☒ No ☐ N/A ☐ RMK#

d. Response procedures for fire/explosions?

Yes ☒ No ☐ N/A ☐ RMK#

e. Response to groundwater contamination incidents?

Yes ☒ No ☐ N/A ☐ RMK#

f. Shutdown procedures?

Yes ☒ No ☐ N/A ☐ RMK#

5. Is the personnel training program directed by a person trained in hazardous waste management procedures? [3745-65-16(A)(2)]

Yes ☒ No ☐ N/A ☐ RMK#

6. Do new employees receive training within six months after the date of hire (or assignment to a new position)? [3745-65-16(B)]

Yes ☒ No ☐ N/A ☐ RMK#

7. Does the generator provide annual refresher training to employees? [3745-65-16(C)]

Yes ☒ No ☐ N/A ☐ RMK# 3

8. Are training records for current personnel kept until closure of the facility? [3745-65-16(E)]

Yes ☒ No ☐ N/A ☐ RMK#

9. Are training records for former employees kept for at least three years from the date the employee last worked at the facility? [3745-65-16(E)]

Yes ☒ No ☐ N/A ☐ RMK#

Vickery Environmental, Inc.

OHD 020 273 819

03-72-0191

- J. **Optional:** The following section can be used by the inspector to document that all personnel who are involved with hazardous waste management have been trained. The employees who need training (written and/or on-the-job) may include the following: environmental coordinators, drum handlers, emergency coordinators, personnel who conduct hazardous waste inspections, emergency response teams, personnel who prepare manifests, etc.

Job Performed

Name of Employee

Date(s) Trained

REMARKS

CONTINGENCY PLAN

1. Does the generator have a contingency plan which describes the following: [3745-65-52(A) through (F)]
 - a. Actions to be taken in response to fires, explosions or any unplanned release of hazardous waste? Yes x No ☐ N/A ___RMK#
 - b. Arrangements with emergency authorities? [3745-65-37] Yes x No ☐ N/A ___RMK#
 - c. A current list of names, addresses and telephone numbers (office and home) of all persons qualified to act as emergency coordinator? Yes X No ☐ N/A ___RMK#
 - d. A list of all emergency equipment, including: location, physical description and brief outline of capabilities? Yes x No ☐ N/A ___RMK#
 - e. An evacuation plan for facility personnel where there is a possibility that evacuation may be necessary? Yes x No ☐ N/A ___RMK#

NOTE: If the facility already has a "Spill Prevention, Control and Countermeasures Plan" under 40 CFR Part 112 or 40 CFR Part 1510, or some other emergency plan, the facility can amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with OAC requirements. [3745-65-52(B)]

2. Is the plan designed to minimize hazards to human health or the environment from fires, explosions or any unplanned release of hazardous waste? [3745-65-51(A)] Yes x No ☐ N/A ___RMK#
3. Is a copy of the plan (plus revisions) kept on-site and been given to all emergency authorities that may be requested to provide emergency services? [3745-65-53(A)(B)] Yes x No ☐ N/A ___RMK#
4. Has the generator revised the plan in response to rule changes, facility, equipment and personnel changes, failure of the plan or as required by the Director? [3745-65-54] Yes x No ☐ N/A ___RMK#

EMERGENCY COORDINATOR

5. Is an emergency coordinator available at all times (on-site or on-call)? [3745-65-55] Yes ☒ No ☐ N/A ☐ RMK#

NOTE: *The emergency coordinator shall be thoroughly familiar with: (a) all aspects of the facility's contingency plan; (b) all operations and activities at the facility; (c) the location and characteristics of waste handled; (d) the location of all records within the facility; (e) facility layout; and (f) shall have the authority to commit the resources needed to implement provisions of the contingency plan*

6. Has there been a fire, explosion or release of hazardous waste or hazardous waste constituents since the last inspection? If so: Yes ☐ No ☒ N/A ☐ RMK#
- a. Was the contingency plan implemented? [3745-65-51(B)] Yes ☐ No ☐ N/A ☒ RMK#
- b. Did the facility follow the emergency procedures in 3745-65-56(A) through (H)? Yes ☐ No ☐ N/A ☒ RMK#
- c. Did the facility submit a report to the Director within 15 days of the incident as required by 3745-65-56(J)? Yes ☐ No ☐ N/A ☒ RMK#

NOTE: *OAC 3745-65-51(B) requires that the contingency plan be implemented immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous waste constituents, which could threaten human health and the environment.*

REMARKS

PREPAREDNESS AND PREVENTION [3745-52-34(A)(4)]

1. Is the facility operated to minimize the possibility of fire, explosion, or any unplanned release of hazardous waste? [3745-65-31] Yes x No ☐ N/A RMK#
2. Does the generator have the following equipment at the facility, if it is required due to actual hazards associated with the waste: [3745-65-32(A)(B)(C)(D)]
 - a. Internal alarm system? Yes x No ☐ N/A RMK#
 - b. Emergency communication device? Yes x No ☐ N/A RMK#
 - c. Portable fire control, spill control and decon equipment? Yes x No ☐ N/A RMK#
 - d. Water of adequate volume/pressure? Yes x No ☐ N/A RMK#
3. Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33] Yes x No ☐ N/A RMK#
4. Are emergency equipment tests (inspections) recorded in a log or summary: [3745-65-33] Yes x No ☐ N/A RMK#
5. Do personnel have immediate access to a communication device when handling hazardous waste (*unless the device is not required under 3745-65-32*)? [3745-65-34] Yes x No ☐ N/A RMK#
6. Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35] Yes x No ☐ N/A RMK#
7. Has the generator attempted to familiarize emergency authorities with possible hazards and facility layout? [3745-65-37(A)] Yes x No ☐ N/A RMK#
 - a. Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)] Yes No ☐ N/A x RMK#

REMARKS

GENERATOR ACCUMULATION

1. Has the generator accumulated hazardous wastes on-site in excess of 90 days without a permit or an extension from the director? [3745-52-34; ORC §3734.02(E)(F)] Yes ☐ No ☒ N/A ☐ RMK#
2. Is the facility a metal finisher that generates waste water treatment sludge with a F006 waste code? If yes: Yes ☐ No ☒ N/A ☐ RMK#

NOTE: If yes, they may accumulate F006 waste on-site for up to 180 days; or up to 270 days if they must transport the F006 waste over 200 miles for off-site metals recovery; without an Ohio hazardous waste permit, provided that they meet these special conditions (OAC 3745-52-34(G) and (H)):

- a. The generator has implemented pollution prevention practices that reduce the amount of any hazardous substances, pollutants or contaminants entering F006 or otherwise released to the environment prior to its recycling (see your P2 coordinator for a copy of Federal Register 3/00 for a listing of examples of P2 measures, the facility should be prepared to demonstrate this request); Yes ☐ No ☒ N/A ☐ RMK#
- b. The F006 waste is legitimately recycled through metals recovery. Yes ☐ No ☒ N/A ☐ RMK#
- c. No more than 20,000 kg. of F006 is accumulated on-site at any one time. Yes ☐ No ☒ N/A ☐ RMK#
- d. The facility complies with the applicable management standards for containers, tanks or containment buildings for LQGs. Yes ☐ No ☒ N/A ☐ RMK#

SATELLITE ACCUMULATION AREA REQUIREMENTS [3745-52-34(C)(1)]

Does the generator ensure that satellite accumulation area(s):

- a. Are at or near a point of generation? Yes x No ☐ N/A RMK#
- b. Are under the control of the operator of the process generating the waste? Yes x No ☐ N/A RMK#
- c. Do not exceed a total of 55 gallons of hazardous waste? Yes x No N/A RMK#
- d. Do not exceed one quart of acutely hazardous waste at any one time? Yes No ☐ N/A x RMK#
- Yes x No ☐ N/A RMK#
- e. Containers are marked with the words "Hazardous Waste" or other words identifying the contents?

NOTE: The satellite accumulation area is limited to 55 gallons of hazardous waste accumulated from a distinct point of generation in the process under the control of the operator of the process generating the waste (less than 1 quart for acute hazardous waste). There could be individual waste streams accumulated in an area from different points of generation. The inspector should refer to Guidance Document #DHWM-008, Satellite Accumulation Under Ohio Hazardous Waste Rules.

4. Is the generator accumulating hazardous waste(s) in excess of the amounts listed in either 2(c) or 2(d)? If so: Yes No x N/A RMK#
- a. Did the generator comply with 3745-52-34(A) or other applicable generator requirements within three days? Yes No ☐ N/A x RMK#
- b. Did the generator mark the container(s) holding excess with the accumulation date when the 55 gallon (one quart) limit was exceeded? Yes No ☐ N/A x RMK#

USE AND MANAGEMENT OF CONTAINERS

- Has the generator marked containers with the words "Hazardous Waste?" [3745-52-34(A)(3)] Yes x No ☐ N/A ___RMK#
6. Is the accumulation date on each container? [3745-52-34(A)(2)] Yes x No ☐ N/A ___RMK#
7. Are hazardous wastes stored in containers which are:
- a. Closed (except when adding/removing wastes)? [3745-66-73(A)] Yes x No ☐ N/A ___RMK#
- b. In good condition? [3745-66-71] Yes x No ☐ N/A ___RMK#
- c. Compatible with wastes stored in them? [3745-66-72] Yes x No ☐ N/A ___RMK#
- d. Handled in a manner which prevents rupture/leakage? [3745-66-73(B)] Yes x No ☐ N/A ___RMK#
8. Is the container accumulation area(s) inspected weekly? [3745-66-74] (*Note location in general information section of checklist*) Yes x No ☐ N/A ___RMK#
- a. Are inspections recorded in a log or summary? [3745-66-74] Yes x No ☐ N/A ___RMK#
9. For ignitable and/or reactive hazardous waste(s):
- a. Are containers located at least 50 feet (15 meters) from the facility's property line? [3745-66-76] Yes x No ☐ N/A ___RMK#
- b. Are containers stored separately from other materials which may interact with the waste in a hazardous manner? [3745-66-77(C)] Yes x No ☐ N/A ___RMK#

PRE-TRANSPORT REQUIREMENTS

Vickery Environmental, Inc.

OHD 020 273 819

03-72-0191

10. Does the generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, -52-31 and -52-32(A)] Yes x No ☐ N/A RMK#
11. Does each container <110 gallons have a completed hazardous waste label? [3745-52-32(B)] Yes x No ☐ N/A RMK#
12. Before off-site transportation, does the generator placard or offer the appropriate DOT placards to the initial transporter? [3745-52-33] Yes x No ☐ N/A RMK#

REMARKS

LDR CHECKLIST

GENERAL LDR REQUIREMENTS

1. Has the generator adequately evaluated all wastes to determine if they are restricted from land disposal? [3745-270-07(A)(1)] If so:
Yes ☒ No ☐ N/A ☐ RMK# ☐
 - a. For determinations based solely on knowledge of the waste: Is supporting data retained on-site? [3745-270-07(A)(6)]
Yes ☒ No ☐ N/A ☐ RMK# ☐
 - b. For determinations based upon analytical testing: Is waste analysis data retained on-site? [3745-270-07(A)(6)]
Yes ☒ No ☐ N/A ☐ RMK# ☐
2. Has the generator determined each EPA hazardous waste code applicable to the waste? [3745-270-07(A)(2) see Table 1]
Yes ☒ No ☐ N/A ☐ RMK# ☐
3. Has the generator determined the correct "treatability group(s)" (e.g., wastewater, non-wastewater, etc.)? [3745-270-07(A), Table 1]
Yes ☒ No ☐ N/A ☐ RMK# ☐
4. Does the generator generate a characteristic hazardous waste? If so:
Yes ☒ No ☐ N/A ☐ RMK# ☐
 - a. Have all underlying hazardous constituents (UHCs) been identified? [3745-270-09(A)]
Yes ☒ No ☐ N/A ☐ RMK# ☐

NOTE: *If the waste is D001 non-wastewater treated by CMBST, RORGS, POLYM in Table 1 of Rule 3745-270-42 UHCs do not need to be identified.*

5. Does the generator generate listed waste(s) which also exhibit hazardous characteristics? [3745-270-09] If so:
Yes ☒ No ☐ N/A ☐ RMK# ☐
 - a. Has the generator also identified the appropriate treatment standard(s) for the constituent(s) which cause the waste to exhibit a characteristic? [3745-270-09(A)]
Yes ☒ No ☐ N/A ☐ RMK# ☐

NOTE: *The generator is not required to identify the treatment standard for the characteristic if the listing covers the associated characteristic (e.g., a F019/D007 hazardous waste - F019 being listed due to chromium content and D007 being the characteristic waste code for chromium). [See OAC Rule 3745-270-09(B)]*

6. Has the generator correctly determined if restricted wastes meet or do not meet treatment standards? [3745-270-07(A)(1)]

Yes ☒ No ☐ N/A ☐ RMK# ☐

NOTE: Wastes with EPA hazardous waste numbers K174 and K175 (chlorinated aliphatic wastes) have specific requirements in rule 3745-270-33. Waste with EPA hazardous waste numbers K176, K177 and K178 (inorganic chemical wastes) have specific requirements in rule 3745-270-36.

7. Does the owner/operator ensure that restricted wastes or treatment residues are not diluted as a method of achieving/circumventing LDR treatment standards? [3745-270-03]

Yes ☒ No ☐ N/A ☐ RMK# ☐

NOTE: A generator may dilute a waste (that is hazardous only because it exhibits a characteristic) in a treatment system that discharges to waters of the State pursuant to an NPDES permit (§402 of CWA), that treats waste in a CWA equivalent treatment system, or that treats waste for the purposes of pre-treatment requirements under §307 of CWA, unless a method other than DEACT is specified or the waste is a D003 reactive cyanide wastewater or non-wastewater.[3745-270-03(B)]

8. Is combustion of any of the wastes identified in the Appendix to Rule 3745-270-03 occurring without meeting one or more of the criteria under Rule 3745-270-03(C) upon generation or after treatment? [3745-270-03(C)]

Yes ☐ No ☐ N/A ☒ RMK# ☐

NOTE: In other words, is combustion a legitimate treatment method.

9. Has the generator added iron to lead-containing hazardous waste in order to achieve LDR treatment standards for lead? [3745-270-03(D)]

Yes ☐ No ☐ N/A ☒ RMK# ☐

10. Does the facility have a case-by-case extension to the effective date to land dispose of hazardous waste?[3745-270-05] If so:

Yes ☐ No ☒ N/A ☐ RMK# ☐

- a. The facility can dispose of hazardous waste in a on-site landfill or surface impoundment.[3745-270-05]

Yes ☐ No ☐ N/A ☒ RMK# ☐

11. Does the facility have an extension to allow for a restricted waste to be land disposed?[3745-270-06] If so:

Yes ☐ No ☒ N/A ☐ RMK# ☐

Vickery Environmental, Inc.

PHD 020 273 819

2-0191

a. The facility can land dispose of the waste. [3745-270-06]

Yes ___ No ☐ N/A ☒ RMK# ___

12. Does the facility treat wastes that are otherwise prohibited from land disposal, in a surface impoundment?

Yes ___ No ☒ N/A ___ RMK# ___

If so:

a. Has the facility complied with 3745-270-04?

Yes ___ No ☐ N/A ☒ RMK# ___

REMARKS

NOTIFICATION AND CERTIFICATION REQUIREMENTS

If a generator's waste or contaminated soil does not meet the treatment standards, does the generator have the paperwork required in Column A of Table 1 of 3745-270-07? [3745-270-07(A)(2)]

Yes ☒ No ☐ N/A ___ RMK# ___

14. If a generators' waste or contaminated soil meets the treatment standard at the original point of generation, does the generator have the paperwork required in Column B of Table 1 of 3745-270-07? [3745-270-07(A)(3)] Yes ☐ No ☐ N/A ☒ RMK# ☐
15. If a generators' waste is exempt (under 3745-270-05, 3745-270-06, national capacity or case-by-case variance, etc.) does the generator have the paperwork required in Column C of Table 1 of 3745-270-07? [3745-270-07(A)(4)] Yes ☐ No ☐ N/A ☒ RMK# ☐
16. If a generator manages a lab pack containing hazardous waste using the alternative treatment standard in 3745-270-42, does the generator have the paperwork required in Column D of Table 1 of 3745-270-07? [3745-270-07(A)(9)] Yes ☐ No ☐ N/A ☒ RMK# ☐
17. Does the generator produce a waste that is hazardous waste from the point of generation, but subsequently excluded from regulation under OAC 3745-51-02 through 3745-51-06? [3745-270-07(A)(7)] If so: Yes ☐ No ☒ N/A ☐ RMK# ☐
- a. Is a one-time notice placed in the facility's file stating such generation, subsequent exclusion or exemption, and disposition of the wastes? [3745-270-07(A)(7)] Yes ☐ No ☐ N/A ☒ RMK# ☐

NOTE: *Examples include hazardous wastes discharged to a POTW or to a surface water under a NPDES permit.(See 270-07(A)(7))*

18. Does the generator retain on-site a copy of all notices, certifications, demonstrations and waste analysis data for at least three years from the last shipment of waste sent off-site? [3745-270-07(A)(8)] Yes ☒ No ☐ N/A ☐ RMK# ☐

REMARKS

GENERATORS TREATING HAZARDOUS WASTE

1. Is treatment of hazardous waste occurring to meet the treatment standards in 3745-270-40? Yes ☐ No ☒ N/A ☐ RMK# ☐
2. If so, does the generator have a waste analysis plan containing the following requirements? [3745-270-07(A)(5)] Yes ☐ No ☐ N/A ☒ RMK# ☐

- a. A detailed chemical and physical analysis of a representative sample of the wastes being treated? [3745-270-07(A)(5)(a)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- b. All information necessary to treat the waste(s) in accordance with the requirements of 3745-270, including the selected frequency? [3745-270-07(A)(5)(a)] Yes ☐ No ☐ N/A ☒ RMK# ☐
3. Is the WAP on-site in the facility's files and available to inspectors? [3745-270-07(A)(5)(b)] Yes ☐ No ☐ N/A ☒ RMK# ☐
4. Has the generator followed their WAP [3745-270-07(A)(5)? Yes ☐ No ☐ N/A ☒ RMK# ☐
5. Have the treated wastes met the applicable treatment standards in 3745-270-40? Yes ☐ No ☐ N/A ☒ RMK# ☐

NOTE: *If the waste is a characteristic waste, which has been treated to render it non hazardous and subsequently sent to a solid waste landfill, proceed to question 7 & 8.*

6. Has the generator sent a notification and certification with the initial shipment of waste? [3745-270-07(A)(5)(c)] Yes ☐ No ☐ N/A ☒ RMK# ☐
7. Does each notification/certification form completed, contain the information found in Table 1 of 3745-270-07? [3745-270-07(A)(5)(c)] Yes ☐ No ☐ N/A ☒ RMK# ☐
8. Has the generator, who is treating a characteristic waste, submitted a notification and certification to the director which contains the following:
- a. Name and address of the facility receiving the waste? [3745-270-09(D)(1)(a)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- b. A description of the waste, including EPA hazardous waste codes and treatability group, and UHCs? [3745-270-09(D)(1)(b)] Yes ☐ No ☐ N/A ☒ RMK# ☐

NOTE: *If the waste will be treated and monitored for all UHCs then they do not need to be listed on the notice.*

9. Has the process/operation generating the waste or the solid waste landfill facility changed? If so: Yes ☐ No ☐ N/A ☒ RMK# ☐
- a. Has the notification and certification been updated in the generators and treaters files? [3745-270-09(D)] Yes ☐ No ☐ N/A ☒ RMK# ☐

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- b. Has the director been notified of such changes? [3745-270-09(D)]

Yes ___ No ☒ N/A ☒ RMK# ___

NOTE: *The director need only be notified on an annual basis but no later than December 31.*

10. Is the facility treating contaminated soil using the alternative treatment standards in 3745-270-49? If so:

Yes ___ No ☒ N/A ___ RMK# ___

- a. Has the facility treated the contaminated soil to less than 10 times the Universal Treatment Standards or has a 90% reduction in the total constituent concentrations occurred? [3745-270-49 (C)]

Yes ___ No ☒ N/A ☒ RMK# ___

11. Does each notification/certification form completed, contain the information found in Table 1? [3745-270-07(A)(3)]

Yes ___ No ☒ N/A ☒ RMK# ___

NOTE: *If the waste will be treated and monitored for all constituents, there is no need to put them all on the LDR notice.*

REMARKS

HAZARDOUS DEBRIS

1. Does the material in question meet the definition of hazardous debris as defined in rule 3745-270-02(A)(3)?

Yes ___ No ___ N/A ☒ RMK# ___

2. Is the hazardous debris being treated to the waste specific treatment standard in 3745-270-40 to 3745-270-49? (If yes, use the generator checklist.)

Yes ___ No ___ N/A X RMK# ___

3. Is the hazardous debris being treated by the alternative treatment standards in 3745-270-45? If so:

Yes ___ No ___ N/A X RMK# ___

- a. Has the debris or mixtures of debris been treated for each contaminant subject to treatment (toxicity, listed waste and cyanide reactive debris) using one or more of the treatment technologies found in Table 1 in 3745-270-45? [3745-270-45(A)]

Yes ___ No ☐ N/A X RMK# ___

NOTE: If immobilization has been used in a treatment train, it must be the last treatment technology used.

4. Was the hazardous debris a listed waste treated by an immobilization technology in Table 1? [3745-270-45(A)(1)] If so:

Yes ___ No ___ N/A X RMK# ___

- a. Was immobilization the last treatment technology used? [3745-270-45(A)(3)]

Yes ___ No ☐ N/A X RMK# ___

5. Is the waste a PCB waste under 40 CFR Part 761? If so:

Yes ___ No ___ N/A X RMK# ___

- a. Has the waste been treated to the most stringent standard in 40 CFR 761 or 3745-270-45? [3745-270-45(A)(5)]

Yes ___ No ☐ N/A X RMK# ___

6. Has the residue from the treatment of hazardous debris been disposed of in accordance with 3745-270-40 to 3745-270-49? [3745-270-45(D)]

Yes ___ No ☐ N/A X RMK# ___

7. Does the owner/operator of a treatment facility that claims the debris is excluded from regulation as a hazardous waste under 3745-51-03(F)(1) maintain the following information?

Yes ___ No ___ N/A X RMK# ___

- a. Records of all inspections, evaluations, and analyses of treated debris? [3745-270-07(D)(3)(a)]

Yes ___ No ☐ N/A X RMK# ___

- b. Records of key operating parameters of the treatment unit? [3745-270-07(D)(3)(b)]

Yes ___ No ☐ N/A X RMK# ___

- c. A certification statement for each shipment of treated debris? (See 270-07(D)(3)(c) for exact wording) [3745-270-07(D)(3)(c)]

Yes ___ No ☐ N/A X RMK# ___

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

8. Does the notifications and certifications of an owner/operator who first claims the debris is excluded under 3745-51-03(F)(1) have the following information? [3745-270-07(D)(3)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- a. Name and address of licensed solid waste landfill receiving the treated debris? [3745-270-07(D)(1)(a)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- b. Description of hazardous debris as initially generated with applicable waste codes? [3745-270-07(D)(1)(b)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- c. Technology used from Table 1? [3745-270-07(D)(1)(c)] Yes ☐ No ☐ N/A ☒ RMK# ☐
9. Has the above notification been sent to the director? [3745-270-07(D)(1)] Yes ☐ No ☐ N/A ☒ RMK# ☐

REMARKS

TREATING FACILITIES WHICH TREAT WASTE TO MEET LDR STANDARDS

1. Does the treating facility test waste according to their waste analysis plan as required in 3745-54-13 or 3745-65-13? [3745-270-07(B)] Yes ☒ No ☐ N/A ☐ RMK# ☐
2. Has a one-time notification been sent with the initial shipment of waste or contaminated soil to the land disposal facility? [3745-270-07(B)(3)] Yes ☒ No ☐ N/A ☐ RMK# ☐

Note: *No further notification is necessary until such time that the waste changes or the receiving facility changes.*

3. Does the one-time notification and certification contain the information listed in Table 2 of 3745-270-07? [3745-270-07(B)(3)] Yes ☒ No ☐ N/A ☐ RMK# ☐
4. Are wastes or treatment residues being sent to another TSD to be further managed? If so: Yes ☒ No ☐ N/A ☐ RMK# ☐
- a. Has the facility complied with the generator notification/certification requirements? [Table 1, 3745-270-07(B)(5)] Yes ☒ No ☐ N/A ☐ RMK# ☐
5. Are recyclable materials used in a manner constituting disposal and subsequently subject to 3745-266-20? If so: Yes ☐ No ☐ N/A ☒ RMK# ☐

- a. Has the treatment facility (recycler) sent a notification (found at 3745-270-07(B)(4)), excluding the manifest number, with each shipment of waste? [3745-270-07(B)(6)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- b. Has the treatment facility (recycler) sent a certification found in 3745-270-07(B)(4)[3745-270-07(B)(6)] Yes ☐ No ☐ N/A ☒ RMK# ☐
- c. Has a copy of the notification and certification been sent to the director? [3745-270-07(B)(6)] Yes ☐ No ☐ N/A ☒ RMK# ☐
6. Does the recycling facility maintain records of the name and location of each entity receiving the hazardous waste-derived products? [3745-270-07(B)(6)] Yes ☐ No ☐ N/A ☒ RMK# ☐
7. Does the owner or operator of any land disposal facility disposing of waste subject to regulation under 3745-270 have:
- a. Copies of all notices and certifications required in 3745-270? Yes ☐ No ☐ N/A ☒ RMK# ☐
- b. Test results indicating all waste, extracts of waste or treatment residue are in compliance with 3745-270-40 to 3745-270-49? Yes ☐ No ☐ N/A ☒ RMK# ☐
- c. The testing frequency specified in the facility's WAP and have they followed the protocol? Yes ☐ No ☐ N/A ☒ RMK# ☐

REMARKS

USED OIL INSPECTION CHECKLIST (Short Version)

NOTE: This checklist does not include requirements for used oil transporters and transfer facilities, processors and re-refiners, burners, and marketers.

PROHIBITIONS

- | | | |
|----|---|---|
| 1. | Is used oil being managed in a surface impoundment or waste pile? If so: | Yes ___ No <u>x</u> N/A ___ RMK# |
| | Is the surface impoundment or waste pile being regulated under OAC 3745-54 to 3745-57 and 3745-205 or 3745-65 to 3745-69 and 3745-256? [3745-279-12(A)] | Yes ___ No <input type="checkbox"/> N/A <u>x</u> RMK# |
| 2. | Is used oil being used as a dust suppressant? [3745-279-12(B)] | Yes <input type="checkbox"/> No <u>x</u> N/A ___ RMK# |
| 3. | Is off-specification used oil fuel burned for energy recovery only in devices specified in 3745-279-12(C)? | Yes ___ No <input type="checkbox"/> N/A <u>x</u> RMK# |

USED OIL GENERATOR STANDARDS

- | | | |
|----|--|---|
| 4. | Does the generator mix hazardous waste with used oil only as provided in 3745-279-10(B)? [2745-279-21(A)] | Yes ___ No <input type="checkbox"/> N/A <u>x</u> RMK# |
| 5. | Does the generator of a used oil containing greater than 1,000 ppm total halogens manage the used oil as a hazardous waste unless the presumption is rebutted successfully? [3745-279-21(B)] | Yes ___ No <input type="checkbox"/> N/A <u>x</u> RMK# |
| 6. | Does the generator only store used oil in tanks, containers, or units subject to OAC 3745-54 to 3745-57 and 3745-205 or 3745-65 to 3745-69 and 3745-256? [3745-279-22(A)] | Yes <u>x</u> No <input type="checkbox"/> N/A ___ RMK# |
| 7. | Are containers and aboveground tanks used to store used oil in good condition with no visible leaks? [3745-279-22(B)] | Yes <u>x</u> No <input type="checkbox"/> N/A ___ RMK# |
| 8. | Are containers, above ground tanks, and fill pipes used for underground tanks clearly labeled or marked "Used Oil?" [3745-279-22(C)] | Yes <u>x</u> No <input type="checkbox"/> N/A ___ RMK# |
| 9. | Has the generator, upon detection of a release of used oil, done the following: [3745-279-22(D)] | |
| | a. Stopped the release? | Yes ___ No <input type="checkbox"/> N/A <u>x</u> RMK# |
| | b. Contained the release? | Yes ___ No <input type="checkbox"/> N/A <u>x</u> RMK# |

c. Cleaned up and properly managed the used oil and other materials?

Yes ☐ No ☐ N/A ☒ RMK#

No ☐
N/A ☐
☒
RMK#

d. Repaired or replaced the containers or tanks prior to returning them to service, if necessary?

Yes ☐ No ☐ N/A ☒ RMK#

10. Does the generator burn used oil in used fired space heaters? [3745-279-23] If so:

Yes ☐ No ☒ N/A ☐ RMK#

a. Does the heater burn only used oil that owner/operator generates or used oil received from household do-it-yourself (DIY) used oil generators?

Yes ☐ No ☐ N/A ☒ RMK#

b. Is the heater designed to have a maximum capacity of not more than 0.5 million BTU per hour?

Yes ☐ No ☐ N/A ☒ RMK#

c. Are the combustion gases from heater vented to the ambient air?

Yes ☐ No ☐ N/A ☒ RMK#

11. Does the generator have the used oil hauled only by transporters that have obtained U.S. EPA ID#, unless the generator qualifies for an exemption pursuant to 3745-279-24 (self transportation or tolling agreements)? [3745-279-24]

Yes ☒ No ☐ N/A ☐ RMK#

USED OIL COLLECTION CENTERS AND AGGREGATION POINTS

12. Is the DIY used oil collection center in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-30]

Yes ☐ No ☐ N/A ☒ RMK#

13. Is the non-DIY used oil collection center registered with Ohio EPA? [3745-279-31]

Yes ☐ No ☐ N/A ☒ RMK#

14. Is the used oil aggregation point in compliance with the generator standards in 3745-279-20 to 3745-279-24? [3745-279-32]

Yes ☐ No ☐ N/A ☒ RMK#

WASTE EVALUATION

15. Have all wastes generated at the facility been evaluated? [3745-52-11]

Yes ☒ No ☐ N/A ☐ RMK#

REMARKS

Vickery Environmental, Inc.
OHD 020 273 819
03-72-0191

- OK 1. Ohio EPA received VEI's annual report electronically on 2/16/07.
- OK 2. VEI last submitted the waste minimization report to Ohio EPA on 3/15/06.

OK 3. VEI conducted training required by OAC Rule 3745-54-16(A) for the following employees on February 27, 2006: Steve Lonneman, Carolyn Golamb, Brett Miller, Thomas Stayancho, Kennard Franks, Dennis McClure, Jeff Covert, Gary Emery, James Baumer and Michael Slane. VEI provided training to the above listed employees again from March 12, 2007 through March 16, 2007.

3. Is compliant in the fact that per Vickery's permit, "annual review" of the training (Char-waste) is defined as calendar year.

Also, language in the regulations does not provide different language other than "annual review".

Inspection Checklist for Subpart CC: Air Emission Standards (Tanks)

Applicability: The air emission requirements apply to units subject to Subpart J * unless any of the following apply:

Item # 40 CFR:

*Note: CESQG's and SQG's are exempt

CC-T1	265.1	Do any of the following general exclusions apply? If yes, please circle.	YES	NO
1. Wastewater treatment units -265.1(c)(10) 4. Elementary neutralization units -265.1(c)(10) 2. Emergency spill management units. -265.1(c)(11) 5. Totally enclosed treatment units. -265.1(c)(9) 3. Hazardous waste recycling units. -265.1(c)(6) 6. Satellite accumulation areas. -265.1(c)(7) - 262.34(c)(1)				
CC-T2	265.1080	Do any of the following exceptions apply? If yes, please circle.	YES	NO
1. Waste was placed in the unit prior to Oct. 6, 1996 and none has been added since. -265.1080(b)(1) 2. The unit has stopped adding waste and is undergoing closure pursuant to an approved closure plan. -265.1080(b)(3) 3. The unit is used solely for onsite treatment or storage as a result of remedial activities required under corrective action, Superfund, or other similar state program. -265.1080(b)(5) 4. The unit is used solely to manage radioactive mixed waste. -265.1080(b)(6) 5. The unit operates with an emission control device regulated by and in accordance with Clean Air Act regulations. -(b)(7) 6. The unit operates with a process vent as defined in 264.1031, regulated under Subpart AA. -265.1080(b)(8)				
CC-T3	265.1080(d)	Administrative Stay for Organic Peroxide Waste:	YES	NO
If the unit receives hazardous waste generated by organic peroxide manufacture, and the owner/operator has met the conditions as set forth in 265.1080(d), the requirements under Subpart CC are administratively stayed, <i>except for the record keeping requirements</i> which additionally include the notification requirement as given in 265.1080(d)(3).				
CC-T4	265.1083	Do any of the following exemptions apply? If yes, please circle.	YES	NO
General Standards: The owner/operator must control air emissions from waste management units except the unit is exempt if: 1. All hazardous waste entering the unit has an average VO concentration at the point of origination less than 500 parts per million by weight (waste determination required by 265.1084; see CC-T5). -265.1083(c)(1) 2. The organic content of all waste entering the unit has been reduced by one of the 8 acceptable processes. -265.1083(c)(2) 3. The unit is a tank used for certain biological treatment consistent with 265.1087(c)(2)(iv). -265.1083(c)(3) 4. The hazardous waste placed in the unit meets the LDR numerical concentration limits given in 268.40 or has been treated using the LDR treatment technology specific for the waste (specified in 268.42). -265.1083(c)(4) 5. The unit is a tank within an enclosure used for bulk feed to an incinerator and meets certain requirements. -265.1083(c)(5)				
CC-T5	265.1084	Waste Determination	Determination Not Needed	Determination Needed
Was the VO concentration properly determined for each waste which the facility manages in a unit which does not meet Subpart CC requirements? The concentration must be determined by either direct measurement or knowledge. Please see 265.1084 for specific requirements for measurement and knowledge. Determination is not needed for waste managed in tanks which meet Subpart CC standards. It may be necessary to evaluate tank management prior to requiring VO concentration determination.				

TANK MANAGEMENT

Level 1 tank controls apply only to a fixed-roof tank in which the maximum vapor pressure of organic waste is less than that listed for each tank design capacity, contents are not heated above the temperature of vapor pressure determination, and no waste stabilization is conducted in the tank. -265.1085(b)(1)

Tanks that exceed Level 1 criteria must use Level 2 controls; tanks that do not exceed Level 1 criteria may use Level 2 controls. The five design options for Level 2 controls are given below; vented fixed-roof tanks are the most common. -265.1085(b)(2)

Tank Design Capacity	Level 1 pressure limits	Level 1 OK	Level 2
$\geq 151 \text{ m}^3 / 40,000 \text{ gal}$	$< 5.2 \text{ kPa} / 0.75 \text{ psi}$	Fixed-roof tanks	Fixed-roof tanks vented to control device -265.1085(g)
$< 151 \text{ m}^3$ and $\geq 75 \text{ m}^3$	$< 27.6 \text{ kPa} / 4.0 \text{ psi}$	-265.1085(c)(1) through (c)(4)	External floating roof tanks -265.1085(f)
$< 75 \text{ m}^3 / 20,000 \text{ gal}$	$< 76.6 \text{ kPa} / 11.1 \text{ psi}$	-265.1085(d)	Fixed-roof with internal floating roof -265.1085(e)
			Enclosure vented to combustion device -265.1085(i)
			Pressure tank -265.1085(h)

265.1085(c)

Level 1 Controls for Fixed-Roof Tanks

NA=Not Applicable NI=Not Inspected **OK**=In Compliance DF=Deficiency

CC-T6	265.1085(c)(1)	Vapor Pressure Determination	NA	NI	OK	DF
Has the owner/operator determined the maximum organic vapor pressure of the waste in the tank: by direct measurement or by knowledge?			-265.1085(c)(1) -265.1084(c)(3,4)		YES	NO
Is the determination acceptable?					YES	NO
Does waste in tank exceed vapor pressure threshold for tank size? Y/A (If yes must use Level 2 Controls)					YES	NO
CC-T7	265.1085(c)(2)	Tank Design Specifications	NA	NI	OK	DF

The fixed roof and its closure devices shall be designed to form a continuous barrier over the entire surface area of the hazardous waste in the tank; shall be installed such that there are no visible cracks, holes, gaps or other open spaces between roof and tank wall / closure device and roof. Inspect the fixed roof and closure devices of each tank or a representative percentage of multiple tanks; list and photograph defects at each.

Tank #	Defect(s)	Photo #	Notes
			Y/A

Is each opening in the fixed roof (sampling port, conservation vent, level indicator, safety valve, etc.):

265.1085(c)(2)(i)(A)

equipped with a closure device such that when closed there are no visible cracks, holes, gaps or other open spaces? or;

265.1085(c)(2)(i)(B)

connected via a closed vent system to a control device? (If YES see Level 2 Controls checklist below)

YES

NO

YES

NO

CC-T8	265.1085(j)	Waste transfer requirements	NA	NI	OK	DF
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Transfer of hazardous waste to the tank from another tank subject to 265.1085 or surface impoundment subject to 265.1086 shall be conducted using continuous hard piping or other closed system, to prevent exposure of waste to atmosphere; except under conditions given in 265.1085(j)(2).

CC-T9	265.1085(c)(3)	Operating requirements	NA	NI	OK	DF
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Cover and closure devices shall be closed at all times except when performing routine inspections, sampling, maintenance and cleaning.

Opening of a pressure/vacuum relief valve, conservation vent or similar device is allowed during normal operations to maintain tank pressure within design specifications. Opening of a safety device is allowed at any time.

Pressure/vacuum relief valves and conservation vents designed to operate with NDE when secured in closed position?

Are the opening settings of these devices consistent with the manufacturer's recommended operating ranges?

What are the pressure settings of these devices and how do they compare with Level 1 vapor pressure limits?

YES

NO

YES

NO

OK

DF

CC-T10	265.1085(c)(4)	Inspection requirements	NA	NI	OK	DF
The fixed roof and closure devices shall be visually inspected for defects initially, on or before December 12, 1996, or when first in service and after at least annually, according to written plan; except when unsafe, and delay conditions are met. Buried parts of tank need not be inspected TSDs: The inspection plans must be incorporated into the overall facility inspection plan as per 265.15.						
CC-T11	265.1085(k)	Repair requirements	NA	NI	OK	DF
Owner/operator shall make first efforts at repair of each defect detected during an inspection no later than 5 calendar days after detection; repairs shall be completed as soon as possible but no later than 45 calendar days after detection, except as provided in 265.1085(k)(2).						
CC-T12	265.1090(b)	Recordkeeping requirements	NA	NI	OK	DF
For each unit in service records must be maintained on-site including: unique unit ID number, dimensions and capacity, organic vapor pressure of waste (if tested, records include time and date of samples, analytical method, and results), and inspection and repair records for three years. Please list in detail below deficiencies noted regarding items CC-T6 through CC-T12:						
CC-T13	265.1085(c)(2)	Level 2 Controls for Fixed-Roof Tanks Vented to Control Device	NA=Not Applicable OK= In Compliance	NI=Not Inspected DF= Deficiency		
All requirements of CC-T7 and: Each roof opening not equipped with a closure device shall be connected to a closed system that is vented to a control device which removes or destroys organics in the vent stream, and which shall be operating whenever hazardous waste is in the tank.						
CC-T14	265.1085(j)	Waste transfer requirements	NA	NI	OK	DF
All requirements of CC-T8.						
CC-T15	265.1085(g)	Operating requirements	NA	NI	OK	DF
All requirements of CC-T9 and: Closed vent system and control device shall be installed and operated in accordance with 265.1088.						
CC-T16	265.1085(g)(3)	Inspection requirements	NA	NI	OK	DF
All requirements of CC-T10 and: perform initial leak detection testing of closed vent system on or before date tank is subject to the rule, as per 265.1088(b)(4); annually inspect closed vent system components per 265.1033(k) and 265.1034(b); negative pressure systems per 265.1033(j)(2).						
CC-T17	265.1085(k)	Repair requirements	NA	NI	OK	DF
All requirements of CC-T11.						
CC-T18	265.1090(e)	Recordkeeping requirements	NA	NI	OK	DF
All requirements of CC-T12 and: maintain records of unexpected malfunctions and semiannual updates of planned maintenance operations for 3 years; also: If control device is not a carbon absorber, condenser, flare, process heater, boiler or thermal vapor incinerator, maintain records of proper operation and use (e.g., manufacturer's documentation). Please list in detail below deficiencies regarding items CC-T13 through CC-T18:						